A NONSUBSTANTIVE REVISION OF STATUTES RELATING TO SOLVENCY OF INSURERS, PROPERTY AND CASUALTY INSURANCE, OTHER TYPES OF INSURANCE COVERAGE, AND UTILIZATION REVIEW AND INDEPENDENT REVIEW

Submitted to the 79th Legislature

as part of the

Texas Legislative Council's

Statutory Revision Program

Austin, Texas
2005

1	original 1949 enactment provided that the "act"
2	applied to certain kinds of insurance and insurers and
3	consisted only of the provisions revised as Chapter
4	1805. Although V.T.I.C. Article 5.75-3, which was
5	enacted by Chapter 42, Acts of the 68th Legislature,
6	Regular Session, 1983, is currently included in
7	Subchapter F, that article was not included in the 1949
8	enactment from which Article 5.75 is derived. In
9	addition, Article 5.75-3 includes specific
10	applicability provisions. It is clear from the
11	history of Subchapter F and the language of Article
12	5.75-3 that the legislature did not intend for the
13	reference in Article 5.75 to "[t]his subchapter" to
14	refer to Article 5.75-3. The revised law is drafted
15	accordingly.
16	TITLE 10. PROPERTY AND CASUALTY INSURANCE
17	SUBTITLE A. GENERAL PROVISIONS
18	CHAPTER 1801. PROPERTY AND CASUALTY INSURANCE LEGISLATIVE
19	OVERSIGHT COMMITTEE
20	CHAPTER 1802. PROPERTY AND CASUALTY INSURANCE INITIATIVES
21	TASK FORCE
22	CHAPTER 1803. REPORTS OF INSURANCE COVERAGE FOR STATE AGENCIES
23	CHAPTER 1804. RATES AND FORMS FOR NATIONAL DEFENSE PROJECTS
24	CHAPTER 1805. JOINT UNDERWRITING AND ADVISORY ORGANIZATIONS
25	CHAPTER 1806. PROHIBITED PRACTICES AND REBATES
26	RELATED TO POLICIES
27	CHAPTER 1807. APPLICABILITY TO MARINE INSURANCE
28	[Chapters 1808-1900 reserved for expansion]
29	SUBTITLE B. LIABILITY INSURANCE FOR PHYSICIANS AND
30	HEALTH CARE PROVIDERS
31	CHAPTER 1901. PROFESSIONAL LIABILITY INSURANCE FOR PHYSICIANS
32	AND HEALTH CARE PROVIDERS
33	CHAPTER 1902. CERTAIN LIABILITY COVERAGE FOR PHYSICIANS AND

HEALTH CARE PROVIDERS

1	CHAPTER	1903.	LOSS CONTROL INFORMATION AND SERVICES
2		[Ch	apters 1904-1950 reserved for expansion]
3			SUBTITLE C. AUTOMOBILE INSURANCE
4	CHAPTER	1951.	GENERAL PROVISIONS: AUTOMOBILE INSURANCE
5	CHAPTER	1952.	POLICY PROVISIONS AND FORMS FOR
6			AUTOMOBILE INSURANCE
7		[Ch	apters 1953-2000 reserved for expansion]
8		SUB	TITLE D. FIRE INSURANCE AND ALLIED LINES,
9		II	ICLUDING RESIDENTIAL PROPERTY INSURANCE
10	CHAPTER	2001.	GENERAL PROVISIONS: FIRE INSURANCE
11			AND ALLIED LINES, INCLUDING RESIDENTIAL
12			PROPERTY INSURANCE
13	CHAPTER	2002.	POLICY PROVISIONS AND FORMS FOR FIRE INSURANCE
14			AND ALLIED LINES, INCLUDING RESIDENTIAL
15			PROPERTY INSURANCE
16	CHAPTER	2003.	PROCEDURES FOR EVALUATING FIRE LOSS RISK
17	CHAPTER	2004.	RESIDENTIAL PROPERTY INSURANCE IN
18			UNDERSERVED AREAS
	CHAPTER	2005.	UNDERSERVED AREAS HOME WARRANTY AND HOME PROTECTION INSURANCE
19	CHAPTER	2006.	HOME WARRANTY AND HOME PROTECTION INSURANCE
19 20	CHAPTER	2006. 2007.	HOME WARRANTY AND HOME PROTECTION INSURANCE PREMIUM RATE DISCOUNTS
19 20 21	CHAPTER	2006. 2007. [Ch	HOME WARRANTY AND HOME PROTECTION INSURANCE PREMIUM RATE DISCOUNTS ASSESSMENT FOR RURAL FIRE PROTECTION
19 20 21 22	CHAPTER CHAPTER	2006. 2007. [Ch	HOME WARRANTY AND HOME PROTECTION INSURANCE PREMIUM RATE DISCOUNTS ASSESSMENT FOR RURAL FIRE PROTECTION apters 2008-2050 reserved for expansion]
19 20 21 22 23	CHAPTER CHAPTER	2006. 2007. [Ch	HOME WARRANTY AND HOME PROTECTION INSURANCE PREMIUM RATE DISCOUNTS ASSESSMENT FOR RURAL FIRE PROTECTION apters 2008-2050 reserved for expansion] TITLE E. WORKERS' COMPENSATION INSURANCE
19 20 21 22 23 24	CHAPTER CHAPTER CHAPTER	2006. 2007. [Ch SUB 2051.	HOME WARRANTY AND HOME PROTECTION INSURANCE PREMIUM RATE DISCOUNTS ASSESSMENT FOR RURAL FIRE PROTECTION apters 2008-2050 reserved for expansion] TITLE E. WORKERS' COMPENSATION INSURANCE GENERAL PROVISIONS: WORKERS'
19 20 21 22 23 24 25	CHAPTER CHAPTER CHAPTER	2006. 2007. [Ch SUB 2051.	HOME WARRANTY AND HOME PROTECTION INSURANCE PREMIUM RATE DISCOUNTS ASSESSMENT FOR RURAL FIRE PROTECTION apters 2008-2050 reserved for expansion] TITLE E. WORKERS' COMPENSATION INSURANCE GENERAL PROVISIONS: WORKERS' COMPENSATION INSURANCE
19 20 21 22 23 24 25 26	CHAPTER CHAPTER CHAPTER	2006. 2007. [Ch SUB 2051.	HOME WARRANTY AND HOME PROTECTION INSURANCE PREMIUM RATE DISCOUNTS ASSESSMENT FOR RURAL FIRE PROTECTION apters 2008-2050 reserved for expansion] TITLE E. WORKERS' COMPENSATION INSURANCE GENERAL PROVISIONS: WORKERS' COMPENSATION INSURANCE POLICY PROVISIONS AND FORMS FOR WORKERS'
19 20 21 22 23 24 25 26 27	CHAPTER CHAPTER CHAPTER CHAPTER	2006. 2007. [Ch SUB 2051. 2052.	HOME WARRANTY AND HOME PROTECTION INSURANCE PREMIUM RATE DISCOUNTS ASSESSMENT FOR RURAL FIRE PROTECTION apters 2008-2050 reserved for expansion] TITLE E. WORKERS' COMPENSATION INSURANCE GENERAL PROVISIONS: WORKERS' COMPENSATION INSURANCE POLICY PROVISIONS AND FORMS FOR WORKERS' COMPENSATION INSURANCE
19 20 21 22 23 24 25 26 27 28	CHAPTER CHAPTER CHAPTER CHAPTER	2006. 2007. [Ch SUB 2051. 2052. 2053. 2054.	HOME WARRANTY AND HOME PROTECTION INSURANCE PREMIUM RATE DISCOUNTS ASSESSMENT FOR RURAL FIRE PROTECTION apters 2008-2050 reserved for expansion] TITLE E. WORKERS' COMPENSATION INSURANCE GENERAL PROVISIONS: WORKERS' COMPENSATION INSURANCE POLICY PROVISIONS AND FORMS FOR WORKERS' COMPENSATION INSURANCE RATES FOR WORKERS' COMPENSATION INSURANCE
19 20 21 22 23 24 25 26 27 28 29	CHAPTER CHAPTER CHAPTER CHAPTER	2006. 2007. [Ch SUB 2051. 2052. 2053. 2054.	HOME WARRANTY AND HOME PROTECTION INSURANCE PREMIUM RATE DISCOUNTS ASSESSMENT FOR RURAL FIRE PROTECTION apters 2008-2050 reserved for expansion] TITLE E. WORKERS' COMPENSATION INSURANCE GENERAL PROVISIONS: WORKERS' COMPENSATION INSURANCE POLICY PROVISIONS AND FORMS FOR WORKERS' COMPENSATION INSURANCE RATES FOR WORKERS' COMPENSATION INSURANCE TEXAS MUTUAL INSURANCE COMPANY
19 20 21 22 23 24 25 26 27 28 29 30	CHAPTER CHAPTER CHAPTER CHAPTER CHAPTER CHAPTER	2006. 2007. [Ch SUB 2051. 2052. 2053. 2054. [Ch	HOME WARRANTY AND HOME PROTECTION INSURANCE PREMIUM RATE DISCOUNTS ASSESSMENT FOR RURAL FIRE PROTECTION apters 2008-2050 reserved for expansion] TITLE E. WORKERS' COMPENSATION INSURANCE GENERAL PROVISIONS: WORKERS' COMPENSATION INSURANCE POLICY PROVISIONS AND FORMS FOR WORKERS' COMPENSATION INSURANCE RATES FOR WORKERS' COMPENSATION INSURANCE TEXAS MUTUAL INSURANCE COMPANY apters 2055-2100 reserved for expansion]
19 20 21 22 23 24 25 26 27 28 29 30 31	CHAPTER CHAPTER CHAPTER CHAPTER CHAPTER CHAPTER	2006. 2007. [Ch SUB 2051. 2052. 2053. [Ch 2101.	HOME WARRANTY AND HOME PROTECTION INSURANCE PREMIUM RATE DISCOUNTS ASSESSMENT FOR RURAL FIRE PROTECTION apters 2008-2050 reserved for expansion] TITLE E. WORKERS' COMPENSATION INSURANCE GENERAL PROVISIONS: WORKERS' COMPENSATION INSURANCE POLICY PROVISIONS AND FORMS FOR WORKERS' COMPENSATION INSURANCE RATES FOR WORKERS' COMPENSATION INSURANCE TEXAS MUTUAL INSURANCE COMPANY apters 2055-2100 reserved for expansion] SUBTITLE F. OTHER COVERAGE

- 1 CHAPTER 2151. TEXAS AUTOMOBILE INSURANCE PLAN ASSOCIATION
- 2 CHAPTER 2152. GROUP INSURANCE IN UNDERSERVED AREAS
- 3 CHAPTER 2153. GROUP MARKETING OF AUTOMOBILE INSURANCE FOR PERSONS
- 4 OVER 55 YEARS OF AGE
- 5 CHAPTER 2154. VOLUNTEER FIRE DEPARTMENT MOTOR VEHICLE
- 6 SELF-INSURANCE PROGRAM
- 7 [Chapters 2155-2170 reserved for expansion]
- 8 CHAPTER 2171. COMMERCIAL GROUP PROPERTY INSURANCE
- 9 [Chapters 2172-2200 reserved for expansion]
- 10 CHAPTER 2201. RISK RETENTION GROUPS AND PURCHASING GROUPS
- 11 CHAPTER 2202. JOINT UNDERWRITING
- 12 CHAPTER 2203. MEDICAL LIABILITY INSURANCE JOINT UNDERWRITING
- 13 ASSOCIATION
- 14 CHAPTER 2204. TEXAS INSURANCE EXCHANGE
- 15 CHAPTER 2205. TEXAS CHILD-CARE FACILITY LIABILITY POOL
- 16 CHAPTER 2206. RISK MANAGEMENT POOLS FOR CERTAIN
- 17 EDUCATIONAL ENTITIES
- 18 CHAPTER 2207. EXCESS LIABILITY POOLS FOR COUNTIES AND
- 19 CERTAIN EDUCATIONAL ENTITIES
- 20 CHAPTER 2208. TEXAS PUBLIC ENTITY EXCESS INSURANCE POOL
- 21 CHAPTER 2209. TEXAS NONPROFIT ORGANIZATIONS LIABILITY POOL
- 22 CHAPTER 2210. TEXAS WINDSTORM INSURANCE ASSOCIATION
- 23 CHAPTER 2211. FAIR PLAN
- 24 CHAPTER 2212. SELF-INSURANCE TRUSTS FOR HEALTH CARE
- 25 LIABILITY CLAIMS
- 26 CHAPTER 2213. SELF-INSURANCE TRUSTS FOR BANKS AND SAVINGS
- 27 AND LOAN ASSOCIATIONS
- 28 [Chapters 2214-2250 reserved for expansion]
- SUBTITLE H. RATEMAKING IN GENERAL
- 30 CHAPTER 2251. RATES
- 31 CHAPTER 2252. RATE ADMINISTRATION
- 32 CHAPTER 2253. RATING TERRITORIES
- 33 CHAPTER 2254. PREMIUM REFUND FOR CERTAIN PERSONAL LINES
- 34 [Chapters 2255-2300 reserved for expansion]

1	SUBTITLE I. POLICY FORMS IN GENERAL
2	CHAPTER 2301. POLICY FORMS
3	TITLE 10. PROPERTY AND CASUALTY INSURANCE
4	SUBTITLE A. GENERAL PROVISIONS
5	CHAPTER 1801. PROPERTY AND CASUALTY INSURANCE LEGISLATIVE
6	OVERSIGHT COMMITTEE
7	SUBCHAPTER A. GENERAL PROVISIONS
8	Sec. 1801.001. DEFINITION
9	Sec. 1801.002. SUNSET PROVISION
10	[Sections 1801.003-1801.050 reserved for expansion]
11	SUBCHAPTER B. LEGISLATIVE OVERSIGHT COMMITTEE
12	Sec. 1801.051. COMPOSITION OF COMMITTEE
13	Sec. 1801.052. MEETINGS
14	Sec. 1801.053. POWERS AND DUTIES OF COMMITTEE
15	Sec. 1801.054. REPORT
16	CHAPTER 1801. PROPERTY AND CASUALTY INSURANCE LEGISLATIVE
17	OVERSIGHT COMMITTEE
18	SUBCHAPTER A. GENERAL PROVISIONS
19	Revised Law
20	Sec. 1801.001. DEFINITION. In this chapter, "committee"
21	means the property and casualty insurance legislative oversight
22	committee. (V.T.I.C. Art. 21.49-20, Sec. (a).)
23	Source Law
24 25 26	Art. 21.49-20. (a) In this section, "committee" means the property and casualty insurance legislative oversight committee.
27	Revised Law
28	Sec. 1801.002. SUNSET PROVISION. The committee is subject
29	to Chapter 325, Government Code (Texas Sunset Act). Unless
30	continued in existence as provided by that chapter, the committee
31	is abolished September 1, 2007. (V.T.I.C. Art. 21.49-20, Sec.
32	(d).)
33	Source Law
34 35 36	(d) The committee is subject to Chapter 325, Government Code (Texas Sunset Act). Unless continued in existence as provided by that chapter, the

1	committee is abolished September 1, 2007.
2	[Sections 1801.003-1801.050 reserved for expansion]
3	SUBCHAPTER B. LEGISLATIVE OVERSIGHT COMMITTEE
4	Revised Law
5	Sec. 1801.051. COMPOSITION OF COMMITTEE. (a) The
6	property and casualty insurance legislative oversight committee is
7	composed of seven members as follows:
8	(1) the chair of the Senate Business and Commerce
9	Committee and the chair of the House Committee on Insurance, who
10	shall serve as joint presiding officers of the committee;
11	(2) two members of the senate appointed by the
12	lieutenant governor;
13	(3) two members of the house of representatives
14	appointed by the speaker of the house of representatives; and
15	(4) the public insurance counsel.
16	(b) An appointed member of the committee serves at the
17	pleasure of the appointing official.
18	(c) In making appointments to the committee, the appointing
19	officials shall attempt to appoint persons who represent the gender
20	composition, minority populations, and geographic regions of this
21	state. (V.T.I.C. Art. 21.49-20, Secs. (b), (c).)
22	Source Law
23 24	(b) The committee is composed of seven members as follows:
25 26 27 28 29 30 31 32	(1) the chair of the Senate Business and Commerce Committee and the chair of the House Committee on Insurance, who shall serve as joint chairs of the committee; (2) two members of the senate appointed by the lieutenant governor; (3) two members of the house of representatives appointed by the speaker of the house
33 34 35 36 37 38 39 40	of representatives; and (4) the public insurance counsel. (c) An appointed member of the committee serves at the pleasure of the appointing official. In making appointments to the committee, the appointing officials shall attempt to appoint persons who represent the gender composition, minority populations, and geographic regions of the state.
41	Revised Law
42	Sec. 1801.052. MEETINGS. The committee shall meet with the

commissioner at least annually. (V.T.I.C. Art. 21.49-20, Sec. (e)

	(part).)
2	Source Law
3 4 5	<pre>(e) The committee shall:</pre>
6	Revised Law
7	Sec. 1801.053. POWERS AND DUTIES OF COMMITTEE. (a) The
8	committee shall:
9	(1) receive information about rules proposed by the
10	department relating to property and casualty insurance and may
11	submit comments to the commissioner on the proposed rules;
12	(2) monitor the progress of property and casualty
13	insurance regulation reform, including:
14	(A) the fairness of rates, underwriting
15	guidelines, and rating manuals;
16	(B) the availability of coverage; and
17	(C) the effect of rate rollbacks, credit scoring,
18	and regulation of homeowners and automobile insurance markets;
19	(3) review recommendations for legislation proposed
20	by the department; and
21	(4) review the necessity of having the department
22	periodically examine the market conduct of an insurer or group of
23	insurers, including the insurer's or group's:
24	(A) business practices;
25	(B) performance; and
26	(C) operations.
27	(b) The committee may request reports and other information
28	from the department as necessary to implement this chapter.
29	(V.T.I.C. Art. 21.49-20, Secs. (e) (part), (f).)
30	Source Law
31 32 33 34 35 36 37 38	(e) The committee shall: (2) receive information about rules relating to property and casualty insurance proposed by the department, and may submit comments to the commissioner on those proposed rules; (3) monitor the progress of property and casualty insurance regulation reform, including the fairness of rates, underwriting guidelines, and rating

1 2 3 4 5 6 7 8 9 10 11 12	manuals, the availability of coverage, the effect of rate rollbacks, credit scoring, and regulation of homeowners and automobile insurance markets; (4) review recommendations for legislation proposed by the department; and (5) review the necessity of having the department periodically examine the market conduct of an insurer or group of insurers, including the business practices, performance, and operations of the insurer or group of insurers. (f) The committee may request reports and other information from the department as necessary to carry out this section.
14	Revised Law
15	Sec. 1801.054. REPORT. (a) Not later than November 15 of
16	each even-numbered year, the committee shall report on the
17	committee's activities under Sections 1801.052 and 1801.053(a) to:
18	(1) the governor;
19	(2) the lieutenant governor; and
20	(3) the speaker of the house of representatives.
21	(b) The report must include:
22	(1) an analysis of any problems caused by property and
23	casualty insurance regulation reform; and
24	(2) recommendations of any legislative action
25	necessary to address those problems and to foster stability,
26	availability, and competition within the property and casualty
27	insurance industry. (V.T.I.C. Art. 21.49-20, Sec. (g).)
28	Source Law
29 30 31 32 33 34 35	(g) Not later than November 15 of each even-numbered year, the committee shall report to the governor, lieutenant governor, and speaker of the house of representatives on the committee's activities under Subsection (e) of this section. The report shall
34 35	include: (1) an analysis of any problems caused by
37	property and casualty insurance regulation reform; and (2) recommendations of any legislative
38 39	action necessary to address those problems and to foster stability, availability, and competition
40 41	within the property and casualty insurance industry. CHAPTER 1802. PROPERTY AND CASUALTY INSURANCE INITIATIVES TASK
±1 42	FORCE
42 43	Sec. 1802.001. PROPERTY AND CASUALTY INSURANCE
14	INITIATIVES TASK FORCE

1	CHAPTER 1802. PROPERTY AND CASUALTY INSURANCE INITIATIVES TASK
2	FORCE
3	Revised Law
4	Sec. 1802.001. PROPERTY AND CASUALTY INSURANCE INITIATIVES
5	TASK FORCE. (a) The commissioner may establish a task force to
6	study the utility and feasibility of instituting various property
7	and casualty insurance initiatives in this state.
8	(b) The initiatives studied may include:
9	(1) possible coordination with:
10	(A) the Texas Economic Development Bank to make
11	certain property and casualty insurance an enterprise zone program
12	under Chapter 2303, Government Code; and
13	(B) Neighborhood Housing Service (NHS) programs
14	to establish voluntary NHS-Insurance Industry Partnerships;
15	(2) possible insurance agent programs to increase
16	minority agency access to standard insurance companies, including
17	minority intern programs with insurance companies;
18	(3) possible tax incentives for insurance written in
19	underserved areas; and
20	(4) a consumer education program designed to increase
21	the ability of consumers to differentiate among different products
22	and providers in the property and casualty insurance market.
23	(V.T.I.C. Art. 21.49B.)
24	Source Law
25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43	Art. 21.49B. The commissioner may establish a task force to study the utility and feasibility of instituting various property and casualty insurance initiatives in this state. The initiatives to be studied may include, but are not limited to: (1) possible coordination with the Texas Economic Development Bank to make certain property and casualty insurance an enterprise zone program pursuant to Chapter 2303, Government Code; (2) possible coordination with Neighborhood Housing Service (NHS) Programs to establish voluntary NHS-Insurance Industry Partnerships; (3) possible insurance agent programs to increase minority agency access to standard insurance companies, including minority intern programs with insurance companies; (4) possible tax incentives for insurance written in underserved areas; and

1 2 3 4	(5) a consumer education program designed to increase the ability of consumers to differentiate among different products and providers in the property and casualty market.
5	Revisor's Note
6	(1) V.T.I.C. Article 21.49B states that the
7	initiatives studied under that article may "include,
8	but are not limited to" the specified initiatives. The
9	revised law omits the phrase "but are not limited to"
10	as unnecessary because Section 311.005(13),
11	Government Code (Code Construction Act), applicable to
12	the revised law, and Section 312.011(19), Government
13	Code, provide that "includes" and "including" are
14	terms of enlargement and not of limitation and do not
15	create a presumption that components not expressed are
16	excluded.
17	(2) Subdivision (5), V.T.I.C. Article 21.49B,
18	refers to "the property and casualty market." The
19	revised law substitutes the phrase "the property and
20	casualty insurance market" for "the property and
21	casualty market" to avoid confusion and to be
22	consistent with the first sentence of the section.
23	CHAPTER 1803. REPORTS OF INSURANCE COVERAGE FOR STATE AGENCIES
24	Sec. 1803.001. DEFINITIONS
25	Sec. 1803.002. REPORTING REQUIREMENTS
26	Sec. 1803.003. FAILURE TO REPORT
27	Sec. 1803.004. RULES
28	CHAPTER 1803. REPORTS OF INSURANCE COVERAGE FOR STATE AGENCIES
29	Revised Law
30	Sec. 1803.001. DEFINITIONS. In this chapter:
31	(1) "Insurer" means an insurance company or other
32	entity that is authorized by the department to engage in the
33	business of insurance in this state, including:
34	(A) a reciprocal or interinsurance exchange;
35	(B) a mutual insurance company;
36	(C) a county mutual insurance company; and

1	(D) a Lloyd's plan.
2	(2) "State agency" has the meaning assigned by Sectio
3	412.001, Labor Code. (V.T.I.C. Art. 21.49-15A, Secs. 1(1), (3).)
4	Source Law
5 6 7 8 9 10 11	Art. 21.49-15A Sec. 1. In this article: (1) "Insurer" means an insurance company, inter-insurance exchange, mutual or reciprocal association, county mutual insurance company, Lloyd's plan, or other entity that is authorized by the Texas Department of Insurance to engage in the business of insurance in this state.
13 14	(3) "State agency" has the meaning assigned by Section 412.001, Labor Code.
15	Revisor's Note
16	(1) Section 1(1), V.T.I.C. Article 21.49-15A,
17	refers to an "inter-insurance exchange" and a "mutual
18	or reciprocal association." For consistency in
19	terminology throughout this code, the revised law
20	substitutes "reciprocal or interinsurance exchange"
21	for "inter-insurance exchange" and "reciprocal
22	association" because that is the term used in Chapter
23	942 of this code, which governs reciprocal and
24	interinsurance exchanges, and substitutes "mutual
25	insurance company" for "mutual association"
26	because that is the term used in Chapter 883 of this
27	code, which governs mutual insurance companies.
28	(2) Section 1(2), V.T.I.C. Article 21.49-15A,
29	defines "office" as the State Office of Risk
30	Management. For clarity, the revised law omits the
31	definition and substitutes the full name of the agency
32	for references to "office" throughout the chapter.
33	The omitted law reads:
34 35	(2) "Office" means the State Office of Risk Management.
36	Revised Law
37	Sec. 1803.002. REPORTING REQUIREMENTS. (a) Each insure

that enters into an insurance policy or other contract or agreement

- 1 with a state agency for the purchase by the state agency of
- 2 property, casualty, or liability insurance coverage, including a
- 3 policy, contract, or agreement subject to competitive bidding
- 4 requirements, shall report to the State Office of Risk Management
- 5 the intended sale of the insurance coverage.
- 6 (b) The insurer shall report the intended sale of the
- 7 insurance coverage not later than the 30th day before the date the
- 8 sale is scheduled to occur in the manner prescribed by the State
- 9 Office of Risk Management.
- 10 (c) The State Office of Risk Management may require an
- 11 insurer to submit copies of insurance forms, policies, and other
- 12 relevant information. (V.T.I.C. Art. 21.49-15A, Secs. 2(a), (b),
- 13 (c).)

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14 <u>Source Law</u>

- Sec. 2. (a) Each insurer that enters into an insurance policy or other contract or agreement with a state agency for the purchase of property, casualty, or liability insurance coverage by the state agency, including a policy, contract, or agreement subject to competitive bidding requirements, shall report the intended sale to the office in the manner prescribed by that office.
- (b) The insurer shall report the intended sale not later than the 30th day before the date the sale of the insurance coverage is scheduled to occur.
- (c) The office may require an insurer to submit copies of insurance forms, policies, and other relevant information.

29 Revised Law

- 30 Sec. 1803.003. FAILURE TO REPORT. An insurer that fails to
- 31 comply with the reporting requirements of this chapter is subject
- 32 to sanctions under Chapter 82. (V.T.I.C. Art. 21.49-15A, Sec.
- 33 2(e).)

34 <u>Source Law</u>

(e) Failure by an insurer to comply with the reporting requirements adopted under this article constitutes grounds for the imposition of sanctions against that insurer under Chapter 82.

39 Revised Law

- 40 Sec. 1803.004. RULES. The State Office of Risk Management
- 41 shall adopt rules as necessary to implement this chapter. The
- 42 office shall consult with the commissioner in adopting rules.

1	(V.T.I.C. Art. 21.49-15A, Sec. 2(d).)
2	Source Law
3 4 5	(d) The office shall adopt rules as necessary to implement this article. In adopting those rules, the office shall consult with the commissioner.
6	CHAPTER 1804. RATES AND FORMS FOR NATIONAL DEFENSE PROJECTS
7	Sec. 1804.001. APPLICABILITY OF CHAPTER
8	Sec. 1804.002. SPECIAL RATES AND RATING PLANS FOR
9	CASUALTY INSURANCE 796
10	Sec. 1804.003. SPECIAL RATES AND FORMS FOR MATERIAL
11	DAMAGE INSURANCE
12	CHAPTER 1804. RATES AND FORMS FOR NATIONAL DEFENSE PROJECTS
13	Revised Law
14	Sec. 1804.001. APPLICABILITY OF CHAPTER. This chapter
15	applies only to insurance in relation to a national defense project
16	in this state. (V.T.I.C. Arts. 5.69 (part), 5.70 (part), 5.71
17	(part).)
18	Source Law
19 20 21 22 23 24 25 26	Art. 5.69 [to be applicable only to the construction or operation of National Defense Projects] in Texas, Art. 5.70 [required or used upon] such [National Defense Projects, and] Art. 5.71. This subchapter shall be applicable only to rates upon insurance in relation to National Defense Projects, and
27	Revisor's Note
28	V.T.I.C. Article 5.71 states that the subchapter,
29	meaning Subchapter E, V.T.I.C. Chapter 5, revised as
30	this chapter, is "applicable only to rates upon
31	insurance in relation to National Defense Projects."
32	V.T.I.C. Article 5.70, revised in relevant part in
33	this chapter as Section 1804.003, is expressly
34	applicable to rates and forms for this insurance. The
35	revised law omits the reference in V.T.I.C. Article
36	5.71 to "rates" because the reference is inaccurate
37	and because each provision of Subchapter E, Chapter 5,
38	contains express language indicating the

applicability of the provision to "rates" or "rates and forms."

3 Revised Law

Sec. 1804.002. SPECIAL RATES AND RATING PLANS FOR CASUALTY 4 5 INSURANCE. (a) The commissioner may promulgate special rates and 6 compensation special rating plans for workers' insurance, automobile insurance, and other lines of casualty insurance, to 7 apply only to the construction or operation of a national defense 8 9 project.

- (b) The commissioner may promulgate the special rates and special rating plans separately for each class of insurance or in combination for all classes of insurance.
- 13 (c) The commissioner may adopt rules as may be necessary, 14 proper, or advisable to place in effect special rates and special 15 rating plans promulgated under this section. (V.T.I.C. Art. 5.69 16 (part).)

17 Source Law

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Art. 5.69. The Board of Insurance Commissioners of Texas is hereby authorized and empowered to make and promulgate special rates and special rating plans for Workmen's Compensation, Motor Vehicle and other lines of Casualty insurance to be applicable only to the construction or operation of National Defense Projects . . . and to make such special rates and special rating plans separately for each class of insurance, or in combination of all such classes. The Board shall also have authority to make and promulgate such rules and regulations as may be necessary, proper or advisable in placing such rates and plans in effect.

Revisor's Note

(1) V.T.I.C. Article 5.69 refers to the "Board of Insurance Commissioners of Texas." Under Chapter 499, Acts of the 55th Legislature, Regular Session, 1957, administration of the insurance laws of this state was reorganized, and the powers and duties of the Board of Insurance Commissioners were transferred to the State Board of Insurance. Chapter 685, Acts of the 73rd Legislature, Regular Session, 1993, abolished the State Board of Insurance and transferred its functions

- to the commissioner of insurance and the Texas

 Department of Insurance. Throughout this chapter,

 references to the Board of Insurance Commissioners

 have been changed appropriately.
 - (2) V.T.I.C. Article 5.69 refers to "[m]otor [v]ehicle . . . insurance." The revised law substitutes "automobile insurance" for "motor vehicle insurance" for consistency of terminology in this code. "Automobile insurance" is the term more commonly used to describe the kind of insurance that provides coverage for motor vehicles.
 - of Insurance Commissioners of Texas, meaning the commissioner of insurance for the reasons stated in Revisor's Note (1) to this section, to adopt certain "rules and regulations." The revised law throughout this chapter omits references to "regulations" as unnecessary in this context because a rule is defined under Section 311.005(5), Government Code (Code Construction Act), to include a regulation, and that definition applies to the revised law.

Revised Law

- Sec. 1804.003. SPECIAL RATES AND FORMS FOR MATERIAL DAMAGE
 INSURANCE. (a) The commissioner may promulgate special rates and
 forms for fire insurance, windstorm insurance, and other kinds of
 material damage insurance required or used on a national defense
 project.
- 28 (b) The commissioner may adopt rules incidental to the 29 business described by Subsection (a) and necessary to place in 30 effect special rates and forms promulgated under this section. 31 (V.T.I.C. Art. 5.70 (part).)
- 32 Source Law
- 33 Art. 5.70. The Board of Insurance Commissioners 34 is hereby authorized and empowered to promulgate 35 special rates and forms for fire and windstorm

insurance, and other types of material damage insurance required or used upon . . . National Defense Projects, and the Board may also promulgate rules and regulations incidental to said business and necessary to place its special rates and forms in effect.

Revisor's Note (End of Chapter)

(1)The revised law omits as unnecessary the V.T.I.C. Article 5.71 relating part of to the cumulative effect of the "subchapter," meaning Subchapter E, V.T.I.C. Chapter 5, revised as this chapter. An accepted general principle of statutory construction requires a statute to be given cumulative effect with other statutes unless it provides otherwise or unless the statutes are in conflict. The general principle applies to this revision. The omitted law reads:

Art. 5.71. [This subchapter shall be] cumulative of existing laws and

(2) V.T.I.C. Article 5.71 establishes that the "subchapter," meaning Subchapter E, V.T.I.C. Chapter 5, revised as this chapter, is an exception to existing The revised law omits this provision as laws. rules unnecessary because general of statutory construction provide that a more specific provision supersedes a general statement of law, and this chapter is specific to national defense projects in Furthermore, the revised law omits the Texas. provision as executed because the provision refers to existing law on the date of enactment and served its purpose on that date. The omitted law reads:

Art. 5.71. . . . to the extent of such subject constitutes an exception to existing laws.

CHAPTER 1805. JOINT UNDERWRITING AND ADVISORY ORGANIZATIONS

36 SUBCHAPTER A. GENERAL PROVISIONS

38 [Sections 1805.002-1805.050 reserved for expansion]

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1	SUBCHAPTER B. ADVISORY ORGANIZATIONS
2	Sec. 1805.051. LICENSE APPLICATION
3	Sec. 1805.052. ISSUANCE OF LICENSE; TERM802
4	Sec. 1805.053. INFORMATION REPORTED BY ADVISORY
5	ORGANIZATION803
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7	ADVISORY ORGANIZATION804
8	Sec. 1805.055. SUBMISSION, RECEIPT, AND USE OF
9	INFORMATION BY INSURER 804
10	Sec. 1805.056. AUDIT
11	Sec. 1805.057. RATE FILING REVIEW
12	Sec. 1805.058. PROHIBITED ACTS
13	Sec. 1805.059. DISCIPLINARY ACTION
14	Sec. 1805.060. SUNSET REVIEW
15	Sec. 1805.061. CONFLICT WITH OTHER LAW
16	[Sections 1805.062-1805.100 reserved for expansion]
17	SUBCHAPTER C. EXAMINATIONS
18	Sec. 1805.101. EXAMINATION AUTHORIZED
19	Sec. 1805.102. EXAMINATION COSTS
20	Sec. 1805.103. OUT-OF-STATE EXAMINATION
21	[Sections 1805.104-1805.150 reserved for expansion]
22	SUBCHAPTER D. CERTAIN PRACTICES IN JOINT UNDERWRITING OR JOINT
23	REINSURANCE
24	Sec. 1805.151. AUTHORITY OF COMMISSIONER
25	CHAPTER 1805. JOINT UNDERWRITING AND ADVISORY ORGANIZATIONS
26	SUBCHAPTER A. GENERAL PROVISIONS
27	Revised Law
28	Sec. 1805.001. APPLICABILITY OF CHAPTER. This chapter
29	applies to the kinds of insurance and insurers subject to:
30	(1) Section 403.002;
31	(2) Section 941.003 with respect to the application of
32	a law described by Section 941.003(b)(3) or (c);
33	(3) Section 942.003 with respect to the application of
34	a law described by Section 942.003(b)(3) or (c);

- 1 (4) Subchapter A, B, C, or D, Chapter 5;
- 2 (5) Subchapter H, Chapter 544;
- 3 (6) Subchapter A, Chapter 2301;
- 4 (7) Chapter 252, 253, 254, 255, 426, 1806, 1807, 2001,
- 5 2002, 2003, 2004, 2005, 2006, 2051, 2052, 2053, 2171, 2251, or 2252;
- 6 (8) Subtitle B or C, Title 10;
- 7 (9) Chapter 406A, Labor Code; or
- 8 (10) Chapter 2154, Occupations Code. (V.T.I.C.
- 9 Art. 5.75.)

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10 <u>Source Law</u>

11 Art. 5.75. This subchapter applies to the kinds 12 of insurance and to the insurers subject to 13 Subchapters A, B, C, and D of Chapter 5 of this code.

Revisor's Note

(1)V.T.I.C. Article 5.75 provides that the "subchapter," meaning Subchapter F, V.T.I.C. Chapter 5, applies to certain kinds of insurance and insurers. The text of the article was originally enacted by Section 4, Chapter 539, Acts of the 51st Legislature, Regular Session, 1949, and was codified in 1951 as Article 5.75 in Subchapter F, V.T.I.C. Chapter 5. The original 1949 enactment provided that the "act" applied to certain kinds of insurance and insurers and consisted only of the provisions revised as this chapter (V.T.I.C. Articles 5.72, 5.73, 5.74, Although V.T.I.C. Article 5.75-1, which was enacted by Chapter 117, Acts of the 54th Legislature, Regular Session, 1955, as Article 5.76 and was later renumbered, and Article 5.75-3, which was enacted by Chapter 42, Acts of the 68th Legislature, Regular Session, 1983, are currently included in Subchapter F, those articles were not included in the 1949 enactment from which Article 5.75 is derived. In addition, Articles 5.75-1 and 5.75-3 both include specific applicability provisions. It is clear from the

history of Subchapter F and the language of Articles 5.75-1 and 5.75-3 that the legislature did not intend for the reference in Article 5.75 to "[t]his subchapter" to refer to Articles 5.75-1 and 5.75-3. The revised law is drafted accordingly.

(2) V.T.I.C. Article 5.75 refers to "the kinds of insurance and to the insurers subject to Subchapters A, B, C, and D." Section (d), V.T.I.C. Article 5.19, was included in Subchapter B, V.T.I.C. Chapter 5, and is revised as Section 36.002 of this The revised law does not reference Section code. 36.002 because that section only establishes rulemaking authority for provisions otherwise referenced in this section. V.T.I.C. Articles 5.12, 5.24, 5.49, and 5.68 were included in Subchapters A, B, C, and D, respectively, and were revised, effective April 1, 2005, in Chapters 251, 252, 253, 254, and 255 The revised law does not reference of this code. because it contains Chapter 251 only general provisions applicable in accordance with the other listed provisions. V.T.I.C. Article 5.44 was included in Subchapter C, V.T.I.C. Chapter 5, and was revised in 1987 as Section 417.008, Government Code. The revised law does not reference Section 417.008, Government Code, because that section does not apply to kinds of insurance or insurers.

[Sections 1805.002-1805.050 reserved for expansion]

SUBCHAPTER B. ADVISORY ORGANIZATIONS

29 <u>Revised Law</u>

Sec. 1805.051. LICENSE APPLICATION. (a) A corporation, unincorporated association, partnership, or individual may file with the commissioner an application for an advisory organization license for the kinds of insurance specified in the application.

(b) The applicant must:

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(1)
                       file with the commissioner:
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                             a copy of the applicant's:
 3
                              (i) constitution and bylaws;
                                    article of agreement or association or
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     certificate of incorporation; and
 6
                              (iii)
                                     rules
                                              governing
                                                           the
                                                                 applicant's
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     activities as an advisory organization; and
                             a statement of qualifications to act as an
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                        (B)
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     advisory organization; and
                       pay a $100 license fee. (V.T.I.C. Art. 5.73, Sec.
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                  (2)
     4A(b).)
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                                    Source Law
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                       A corporation, unincorporated association,
                                 individual
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            partnership,
                                              may
                                                     apply
                                                              to
                            or
            commissioner for a license as an advisory organization for the types of insurance the applicant specifies in the application. An applicant must:
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                             file with the commissioner:
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                              (A)
                                   a copy of the applicant's:
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                                         constitution and bylaws;
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                                          article of
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            association, or certificate of incorporation; and
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                                   (iii)
                                           rules
                                                     governing
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            applicant's activities as an advisory organization;
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            and
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                                   a statement of qualifications to
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            act as an advisory organization; and
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                        (2)
                             pay a $100 license fee.
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                                   Revised Law
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            Sec. 1805.052.
                              ISSUANCE
                                          OF
                                                LICENSE;
                                                            TERM.
                                                                    (a)
                                                                          The
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     commissioner shall issue a license to an applicant the commissioner
     determines is qualified, without regard to:
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                  (1)
                       the state of
                                         domicile or
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                                                         residence
                                                                     of
                                                                          the
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     applicant; or
                       the location of the applicant's place of business.
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                 The commissioner shall grant or deny a license to an
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            (b)
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     applicant
                not
                      later than the 60th day after the date the
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     commissioner receives the application.
39
            (c)
                 A license issued under this subchapter remains in effect
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     until the commissioner suspends or revokes the license. (V.T.I.C.
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Art. 5.73, Secs. 4A(d), (e), (f).)

1 Source Law (d) The commissioner shall issue a license to an applicant, without regard to the state of domicile or 2 3 residence of the applicant or the location of the 4 5 6 7 applicant's place of business if the commissioner determines that the applicant is qualified. (e) The commissioner shall grant or deny a license to an applicant on or before the 60th day after 8 9 the date the commissioner receives the application. 10 A license issued under this article remains 11 in effect until the commissioner suspends or revokes the license. 12 13 Revised Law INFORMATION REPORTED 14 Sec. 1805.053. RΥ ADVISORY 15 ORGANIZATION. (a) An advisory organization may file with the costs, supplementary 16 commissioner prospective loss 17 information, and policy forms. A filing made by an advisory 18 organization under this section is subject to the provisions of this code or other insurance laws of this state governing rate 19 filings. 20 21 An advisory organization at least quarterly shall file 22 with the commissioner a list of: each subscriber company engaging in business in 23 (1)24 this state; and 25 (2) the products or information the subscriber company 26 purchases. 27 (c) On request the commissioner, bу advisory organization shall provide to the department a summary of the 28 29 actuarial assumptions, trend factors, economic factors, and other criteria used in trending data for companies engaging in business 30 in this state. (V.T.I.C. Art. 5.73, Secs. 4A(a) (part), (g), (h).) 31 32 Source Law 33 Sec. 4A. (a) An advisory organization may file 34 prospective loss costs, supplementary policy 35 information, and forms with commissioner... A filing made by an advisory organization under this section is subject to the 36 37 provisions of this code or the other insurance laws of 38 39 this state governing rate filings.

least quarterly.

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company doing business in this state and the products

filing required by this subsection shall be made at

or information the subscriber company purchases.

(g) Each advisory organization shall file with commissioner a list showing each subscriber

1 request bу the commissioner, 2 advisory organization shall report to the department a 3 summary of the actuarial assumptions, trend factors, economic factors, and other criteria used in trending data for companies doing business in this state. 4 5 6 Revised Law INSURER'S AUTHORITY TO SUBSCRIBE TO ADVISORY 7 Sec. 1805.054. An insurer engaging in business in this state may 8 ORGANIZATION. subscribe to an advisory organization. (V.T.I.C. Art. 5.73, Sec. 1 9 10 (part).) 11 Source Law [Except as provided by Section 4A(c) of 12 this article,] an insurer transacting business in the 13 14 state may, but is not required to, subscribe to an 15 advisory organization and . 16 Revised Law SUBMISSION, RECEIPT, AND USE OF INFORMATION Sec. 1805.055. 17 18 BY INSURER. (a) Except as provided by Subsection (b), an insurer may submit to or receive from an advisory organization the 19 20 following only if the advisory organization holds a license issued 21 under this subchapter: 22 (1)statistical plans; 23 (2) historical data; 24 (3) prospective loss costs; 25 (4)supplementary rating information; policy forms and endorsements; 26 (5) research; 2.7 (6) rates of individual insurers that are effective at 28 (7)the time the information is submitted or received or that were 29 previously in effect; and 30 performance of inspections. 31 (b) An insurer may not: 32 33 (1)accept from an advisory organization 34 recommendations for rates; or 35 submit to or receive from an advisory organization 36 recommendations for profit or expenses other than loss adjustment 37 expenses. 38 (c) An insurer that subscribes to an advisory organization

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- 1 may use prospective loss costs, supplementary rating information,
- 2 and policy forms filed by the advisory organization under Section
- 3 1805.053(a) and may incorporate the information into the insurer's
- 4 filings.

- 5 (d) Notwithstanding any other law, an insurer that reports
- 6 data under this subchapter is not relieved of the responsibility of
- 7 reporting that data directly to the department at the department's
- 8 request. (V.T.I.C. Art. 5.73, Secs. 1 (part), 2 (part), 4(c),
- 9 4A(a) (part), (c).)

10 <u>Source Law</u>

Art. 5.73

Sec. 1. Except as provided by Section 4A(c) of this article, [an insurer transacting business in the state may, but is not required to, subscribe to an advisory organization and] is permitted to submit to and receive from any advisory organization statistical plans, historical data, prospective loss costs, supplementary rating information, policy forms and endorsements, research, rates of individual insurers that are effective at the time the information is submitted or received or that have been effective, and performance of inspections except recommendations regarding profit or expense provisions, other than loss adjustment expenses.

Sec. 2. . . . no insurer may accept from an advisory organization, recommendations for rates or for profit and expenses other than loss adjustment expenses.

[Sec. 4]

- (c) Notwithstanding any provision to the contrary, reporting of data by an insurer under this article does not relieve the insurer of responsibility of reporting that data directly to the Board at the Board's request.
- Sec. 4A. (a) [An advisory organization may file prospective loss costs, supplementary rating information, and policy forms with the commissioner.] An insurer that subscribes to an advisory organization may use this information and may incorporate the information into the insurer's filings. . . .
- (c) An insurer may not submit information to or receive information from an advisory organization as described by Section 1 of this article unless the advisory organization holds a license issued under this article.

Revisor's Note

Section 4(c), V.T.I.C. Article 5.73, refers to the "Board," meaning the Board of Insurance Commissioners. Under Chapter 499, Acts of the 55th Legislature, Regular Session, 1957, administration of

the insurance laws of this state was reorganized and the powers and duties of the Board of Insurance Commissioners were transferred to the State Board of Insurance. Chapter 685, Acts of the 73rd Legislature, Regular Session, 1993, abolished the State Board of Insurance and transferred its functions to the commissioner of insurance and the Texas Department of Insurance. Throughout this chapter, references to the Board of Insurance Commissioners or the Board have been changed appropriately.

11 Revised Law

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Sec. 1805.056. AUDIT. (a) The department shall require
an annual audit of an advisory organization that provides
statistics or other information to the department in a proceeding
to set rates.

- (b) The audit must:
- 17 (1) be conducted at the expense of the advisory 18 organization under rules adopted by the commissioner; and
- (2) examine the advisory organization's method of collecting, analyzing, and reporting data to ensure the accuracy of data.
- (c) The audit may examine source documents within individual companies.
- 24 (d) Except for individual company information, an audit is 25 public information. (V.T.I.C. Art. 5.73, Sec. 4(a).)

26 Source Law

Sec. 4. (a) The Board shall annually require an any advisory organization that provides statistics or other information to the Board proceeding to set rates. The audit shall be conducted under rules adopted by the Board, at the expense of the The audit must examine the advisory organization. organization's advisory method of collecting, analyzing, and reporting data to assure the accuracy of data. The audit may examine source documents within individual companies. Except for individual company information, an audit is public information.

38 Revised Law

39 Sec. 1805.057. RATE FILING REVIEW. The commissioner may:

review the rate filing of an insurer that relies on 1 (1)2 the prospective loss costs provided by an advisory organization; 3 and (2) require the insurer to provide the insurer's 4 5 actual data and loss experience in addition to the information 6 provided by the advisory organization. (V.T.I.C. Art. 5.73, Sec. 4B.) 7 8 Source Law Sec. 4B. The commissioner may review the rate filing of an insurer that relies on the prospective loss costs provided by an advisory organization and 9 10 11 12 may require the insurer to provide the insurer's actual experience addition 13 and loss in to 14 information provided by the advisory organization. 15 Revised Law Sec. 1805.058. PROHIBITED ACTS. (a) 16 Αn advisory organization may not compile or distribute recommendations for: 17 18 (1)rates; or 19 (2) profit or expenses other than loss adjustment 20 expenses. 21 (b) An insurer or advisory organization may not: attempt to monopolize, combine, or conspire with 22 another person to monopolize an insurance market; 23 24 engage in a boycott, on a concerted basis, of an 25 insurance market; or 26 make an agreement with another insurer, advisory organization, or person if the agreement has the purpose or effect 27 28 of restraining trade unreasonably or substantially lessening competition in the business of insurance. (V.T.I.C. Art. 5.73, 29 Secs. 2 (part), 3(a), (b).) 30 31 Source Law 32 No advisory organization shall compile 33 or distribute, and . . . recommendations for rates or 34 for profit and expenses other than loss adjustment 35 expenses. 36 Sec. 3. (a) An insurer or advisory organization 37 may not: attempt to monopolize, combine, 38 39 with conspire any other person to monopolize 40 insurance market; or

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engage in a boycott, on a concerted

basis, of an insurance market.

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(b) An insurer or advisory organization may not make an agreement with any other insurer, advisory organization, or other person if the agreement has the purpose or effect of restraining trade unreasonably or of substantially lessening competition in the business of insurance.

Revised Law

DISCIPLINARY ACTION. Sec. 1805.059. 9 (a) If, after 10 hearing, the commissioner determines that the furnishing of 11 specified services by an advisory organization involves an act or practice that is unfair, unreasonable, or otherwise inconsistent 12 with this chapter or other applicable laws of this state, the 13 commissioner may issue a written order: 14

- 15 (1) specifying the manner in which the act or practice 16 is unfair, unreasonable, or inconsistent with the applicable law; 17 and
- 18 (2) requiring the advisory organization to 19 discontinue the act or practice.
- 20 (b) In addition to any other remedies available at law, the 21 commissioner may impose a sanction authorized under Chapter 82. 22 (V.T.I.C. Art. 5.73, Sec. 3(c).)

23 Source Law

If, after a hearing, the Board finds that the furnishing of specified services by an advisory organization involves any act or practice which is unfair or unreasonable or otherwise inconsistent with provisions of this subchapter with οr applicable laws of this State, it may issue a written order specifying in what respects such act or practice is unfair or unreasonable or otherwise inconsistent of with the provisions law and requiring discontinuance of such act or practice. In addition to any other remedies available at law, the Board may impose any sanction authorized under Article 1.10 of this code.

Revisor's Note

Section 3(c), V.T.I.C. Article 5.73, authorizes the Board of Insurance Commissioners to take certain action against an advisory organization that provides services involving an act or practice that is unfair, unreasonable, or otherwise inconsistent with the provisions of "this subchapter," meaning Subchapter F,

V.T.I.C. Chapter 5. The revised law substitutes a reference to "this chapter" for the reference to "this subchapter" and does not include a reference to V.T.I.C. Articles 5.75-1 and 5.75-3, which are also included in Subchapter F, V.T.I.C. Chapter 5, for the reasons stated in Revisor's Note (1) to Section 1805.001.

8 Revised Law

9 Sec. 1805.060. SUNSET REVIEW. During the period in which 10 the Sunset Advisory Commission performs its review of the 11 department under Chapter 325, Government Code, the commission shall 12 review the authority granted under this subchapter. (V.T.I.C. 13 Art. 5.73, Sec. 5.)

14 Source Law

Sec. 5. The authority granted under this article shall be reviewed during the normal Sunset cycle of the Texas Department of Insurance.

Revisor's Note

Section 5, V.T.I.C. Article 5.73, provides that the authority granted under the article is to be reviewed during "the normal Sunset cycle" of the Texas Department of Insurance. For the convenience of the reader, the revised law adds a reference to the Sunset Advisory Commission performing the review under Chapter 325, Government Code.

26 Revised Law

Sec. 1805.061. CONFLICT WITH OTHER LAW. To the extent this subchapter conflicts with Section 2053.052(c), 2053.055, 2053.151, 2053.152, or 2053.153, or Subchapter A or C, Chapter 2053, with respect to the setting of rates for workers' compensation insurance, the referenced provision of Chapter 2053 controls. (V.T.I.C. Art. 5.73, Sec. 6.)

33 Source Law

Sec. 6. To the extent that this article conflicts with the provisions of Articles 5.55, 5.58, and 5.58A of this code with respect to the setting of

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rates for workers' compensation insurance, the provisions of those articles control.

Revisor's Note

Section 6, V.T.I.C. Article 5.73, refers to conflicts between Article 5.73 and V.T.I.C. Article 5.58A. The revised law omits the reference to Article 5.58A because that article was repealed by Section 8.13, Chapter 685, Acts of the 73rd Legislature, Regular Session, 1993.

Revisor's Note (End of Subchapter)

Section 4D, V.T.I.C. Article 5.73, requires the select committee on rate and form regulation to appoint an independent consulting firm to evaluate the activities of advisory organizations in this state. The revised law omits Section 4D because that select committee was abolished by Section 13.01, Chapter 876, Acts of the 74th Legislature, Regular Session, 1995. The omitted law reads:

Sec. 4D. The select committee on rate and form regulation created under Article 1.50 of code shall appoint this independent consulting firm to evaluate the activities of advisory organizations this state, including their impact on competition in the insurance market, their including their and their impact on use by insurers, availability and affordability of coverage, other matters relevant determining their continued authorization. The committee shall include in its report to the legislature a recommendation for the future role of advisory organizations in this state.

[Sections 1805.062-1805.100 reserved for expansion]

SUBCHAPTER C. EXAMINATIONS

37 Revised Law

Sec. 1805.101. EXAMINATION AUTHORIZED. (a) As often as the department determines expedient, the department may examine a group, association, or other organization referred to in this chapter, including an advisory organization described by Subchapter B.

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(b) An officer, manager, agent, or employee of the group, association, or organization may be examined at any time under oath and shall make available any book, record, account, document, or agreement governing the method of operation of the group, association, or organization. (V.T.I.C. Art. 5.73, Sec. 4(b); Art. 5.74 (part).)

Source Law

[Art. 5.73, Sec. 4]

(b) An advisory organization is subject to examination under Article 5.74 of this code.

Art. 5.74. The said Board may, as often as it may deem it expedient, make or cause to be made an examination of each group, association, or other organization referred to in Articles 5.72 and 5.73 of this subchapter. . . . The officer, manager, agents and employees of such group, association or other organization may be examined at any time under oath and shall exhibit all books, records, accounts, documents, or agreements governing its method of operation. . .

Revisor's Note

V.T.I.C. Article 5.74 refers to each group, association, or other organization referred to in "Articles 5.72 and 5.73 of this subchapter." V.T.I.C. Articles 5.72 and 5.73 are revised in this chapter as Subchapters B, C, and D. The revised law substitutes for the quoted language a reference to "this chapter" because the groups, associations, and other organizations referred to in Articles 5.72 and 5.73 are the only organizations regulated under this chapter.

Revised Law

Sec. 1805.102. EXAMINATION COSTS. The group, association, or other organization shall pay the reasonable costs of an examination under this subchapter on presentation of a detailed account of the costs. (V.T.I.C. Art. 5.74 (part).)

36 Source Law

Art. 5.74. . . . The reasonable costs of any such examination shall be paid by the group, association or other organization examined upon presentation to it of a detailed account of such costs. . .

1	Revised Law
2	Sec. 1805.103. OUT-OF-STATE EXAMINATION. In lieu of an
3	examination under this subchapter, the department may accept the
4	report of an examination made by the insurance supervisory official
5	of another state in accordance with the laws of that state.
6	(V.T.I.C. Art. 5.74 (part).)
7	Source Law
8 9 10 11	Art. 5.74 In lieu of any such examination the Board may accept the report of an examination made by the insurance supervisory official of another state, pursuant to the laws of such state.
12	[Sections 1805.104-1805.150 reserved for expansion]
13	SUBCHAPTER D. CERTAIN PRACTICES IN JOINT UNDERWRITING OR JOINT
14	REINSURANCE
15	Revised Law
16	Sec. 1805.151. AUTHORITY OF COMMISSIONER. If, after a
17	hearing, the commissioner determines that an activity or practice
18	of a group, association, or other organization of insurers engaging
19	in joint underwriting or joint reinsurance is unfair, unreasonable,
20	or otherwise inconsistent with this chapter or other applicable
21	law, the commissioner may issue a written order:
22	(1) specifying the manner in which the activity or
23	practice is unfair, unreasonable, or inconsistent with the
24	applicable law; and
25	(2) requiring the group, association, or organization
26	to discontinue the activity or practice. (V.T.I.C. Art. 5.72.)
27	Source Law
28 29 30 31 32 33 34 35 36 37 38 39 40	Art. 5.72. (a) Every group, association or other organization of insurers which engages in joint underwriting or joint reinsurance, shall be subject to regulation with respect thereto as herein provided. (b) If, after a hearing, the Board of Insurance Commissioners finds that any activity or practice of any such group, association or other organization is unfair or unreasonable or otherwise inconsistent with the provisions of this subchapter or with the laws applicable thereto, it may issue a written order specifying in what respects such activity or practice is unfair or unreasonable or otherwise inconsistent with the provisions of the applicable laws, and requiring the discontinuance of such activity or

practice.

1	Revisor's Note
2	V.T.I.C. Article 5.72 authorizes the Board of
3	Insurance Commissioners to take certain action against
4	a group, association, or other organization of
5	insurers that engages in joint underwriting or joint
6	reinsurance if an act or practice of the group,
7	association, or organization is unfair, unreasonable,
8	or otherwise inconsistent with "this subchapter,"
9	meaning Subchapter F, V.T.I.C. Chapter 5. The revised
LO	law substitutes a reference to "this chapter" for the
L1	reference to "this subchapter" and does not include a
L2	reference to V.T.I.C. Articles 5.75-1 and 5.75-3,
L3	which are also included in Subchapter F, V.T.I.C.
L4	Chapter 5, for the reasons stated in Revisor's Note (1)
L5	to Section 1805.001.
L6	CHAPTER 1806. PROHIBITED PRACTICES AND REBATES RELATED TO POLICIES
L7	SUBCHAPTER A. GENERAL PROVISIONS
L8	Sec. 1806.001. DEFINITION
L9	[Sections 1806.002-1806.050 reserved for expansion]
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11	SUBCHAPTER D. PROVISIONS APPLICABLE TO FIRE INSURANCE
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21	CHAPTER 1806. PROHIBITED PRACTICES AND REBATES RELATED TO POLICIES
22	SUBCHAPTER A. GENERAL PROVISIONS
23	Revised Law
24	Sec. 1806.001. DEFINITION. In this chapter, "nonprofit
25	business association" means a business association that is a
26	nonprofit corporation exempt from federal income taxation under
27	Section 501(a), Internal Revenue Code of 1986, and its subsequent
28	amendments by being described as an exempt organization by Section
29	501(c)(6) of that code. (V.T.I.C. Art. 5.08, Sec. (d) (part); Art.
30	5.20, Sec. (c) (part).)
31	Source Law
32 33 34 35 36	[Art. 5.08] (d) For purposes of this subsection, "nonprofit business association" means a business association that is a nonprofit corporation exempt from federal income tax under Section 501(a) of the

Internal Revenue Code of 1986, and its subsequent amendments, by being listed as an exempt organization under Section 501(c)(6) of that code.

[Art. 5.20]

2.4

(c) . . . For purposes of this subsection, "nonprofit business association" means a business association that is a nonprofit corporation exempt from federal income tax under Section 501(a) of the Internal Revenue Code of 1986, and its subsequent amendments, by being listed as an exempt organization under Section 501(c)(6) of that code.

[Sections 1806.002-1806.050 reserved for expansion]

SUBCHAPTER B. PROVISIONS APPLICABLE TO AUTOMOBILE INSURANCE

14 Revised Law

Sec. 1806.051. APPLICABILITY OF SUBCHAPTER. This subchapter applies to an insurer writing automobile insurance in this state, including an insurance company, corporation, reciprocal or interinsurance exchange, mutual insurance company, association, Lloyd's plan, or other insurer. (V.T.I.C. Art. 5.01, Sec. (a) (part); Art. 5.08, Sec. (a) (part); Art. 5.09, Sec. (a) (part).)

Source Law

Art. 5.01. (a) Every insurance company, corporation, interinsurance exchange, mutual, reciprocal, association, Lloyd's or other insurer, hereinafter called insurer, writing any form of motor vehicle insurance in this State, [shall annually file]

Art. 5.08. (a) . . . [it shall be unlawful for any insurer,] as defined in this subchapter, . . . [to grant to or contract with insured]

Art. 5.09. (a) ... [no insurer] coming within the terms of this subchapter [shall . . . make or permit any distinction] . . .

Revisor's Note

(1) Section (a), V.T.I.C. Article 5.01, refers to an "interinsurance exchange," a "mutual," a "reciprocal," and a "Lloyd's." For consistent use of terminology throughout this code, the revised law substitutes for the quoted language references to a "reciprocal or interinsurance exchange," a "mutual insurance company," and a "Lloyd's plan." Similar changes have been made throughout this chapter.

(2) Section (a), V.T.I.C. Article 5.01, refers to "motor vehicle insurance." The revised law substitutes "automobile insurance" for "motor vehicle insurance" in this section and throughout this chapter for consistency with terminology used in this code and because "automobile insurance" is the term more commonly used to describe the kind of insurance that provides coverage for motor vehicles.

Revised Law

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sec. 1806.052. CONSTRUCTION OF SUBCHAPTER. This subchapter may not be construed to prohibit the modification of rates by a rating plan that is filed in accordance with the requirements of Chapter 2251 or Article 5.13-2, as applicable, that has not been disapproved by the commissioner, and that is designed to encourage the prevention of accidents, and to account for all relevant factors inside and outside this state, including the peculiar hazards and experience of past and prospective individual risks.

18 (V.T.I.C. Art. 5.09, Sec. (a) (part).)

Source Law

(a) . . . provided that nothing in this subchapter shall be construed to prohibit the modification of rates by rating plans designed to encourage the prevention of accidents, and to take account of the peculiar hazards and experience of individual risks, past and prospective, within and outside the State, and of all other relevant factors, within and outside the State, provided such plan shall have been approved by the Board.

Revisor's Note

(1)Section (a), V.T.I.C. Article 5.09, states that "this subchapter," meaning Subchapter A, V.T.I.C. Chapter 5, may not be construed to prohibit certain modifications of rates. Subchapter A, Chapter 5, is revised in various chapters in this code. provisions of Subchapter A that could be interpreted to prohibit the modification of rates are revised in subchapter. this The revised law is drafted accordingly.

(2) Section (a), V.T.I.C. Article 5.09, requires that certain rating plans be approved by the State Board of Insurance, formerly the Board of Insurance Commissioners. Under Chapter 499, Acts of Session, the 55th Legislature, Regular 1957. administration of the insurance laws of this state was reorganized and the powers and duties of the Board of Insurance Commissioners were transferred to the State Board of Insurance. Chapter 685, Acts of the 73rd Legislature, Regular Session, 1993, abolished board and transferred its functions to the commissioner of insurance and the Texas Department of Insurance. For that reason, references to the Board of Insurance Commissioners and State Board of Insurance have been changed appropriately throughout this chapter.

In addition, under Chapter 206, Acts of the 78th Legislature, Regular Session, 2003, the legislature amended V.T.I.C. Article 5.13-2 to apply on and after June 11, 2003, to commercial automobile insurance, and on and after December 1, 2004, to both personal and commercial automobile insurance. As a result, all rates applicable to automobile insurance are now governed by Article 5.13-2, the relevant portions of which that are revised are contained in Chapter 2251 of this code.

Under the rate regulation system established by Article 5.13-2, most insurers to which the article applies are required to file rates and supplementary rating information, including rating plans, with the commissioner and are authorized to use a rate unless the rate filing or the rate is disapproved by the commissioner. However, under certain circumstances, the commissioner is authorized to require an insurer

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to file rates and supplementary rating information and obtain approval before using the rate or to require use of a different regulatory system. Because the rate regulation system established by Article 5.13-2 requires the absence of the commissioner's disapproval of a rate or rate filing under certain circumstances, but has different requirements under other circumstances, the revised law substitutes a reference to a rating plan "that is filed in accordance with the requirements of Chapter 2251 or Article 5.13-2" and "that has not been disapproved by the commissioner" for the requirement that the rating plan be approved by the commissioner to accurately reflect the regulatory system established under Article 5.13-2. In addition, although Chapter 2251 contains provisions that are derived from V.T.I.C. Article 5.13-2C, the revised law appropriately refers to the chapter in its entirety because the provisions that are derived from Article 5.13-2C do not relate to rating plans for automobile insurance.

(3) Section (c), V.T.I.C. Article 5.09, specifies the provisions of this code under which rates for automobile insurance are determined. revised law omits the provisions of Section (c), Article 5.09, relating to rate regulation before 2004, as executed, and omits December 1, the provisions of that section relating to rate regulation on and after December 1, 2004, as unnecessary because V.T.I.C. Article 5.13-2, the relevant portions of which that are revised are contained in Chapter 2251 of this code, applies by its own terms to personal and commercial automobile insurance. The omitted law reads:

(c) Notwithstanding Subsection (a)

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of this article, on and after the effective 3 4 5 6 7 date of S.B. No. 14, Acts of the 78th Legislature, Regular Session, 2003, rates for personal automobile insurance in this state are determined as provided by Article 5.101 of this code, and rates for commercial motor vehicle insurance in this state are determined as provided by Article 5.13-2 of this code. On and after December 1, 2004, rates for personal automobile insurance and commercial automobile insurance in state are determined as provided by Article 5.13-2 of this code.

Revised Law

Sec. 1806.053. DISCRIMINATIONS OR DISTINCTIONS. Except as provided by Section 1806.056, with respect to business written in this state:

- (1) an insurer may not discriminate or make a distinction, or permit discrimination or a distinction to be made, among insureds having like hazards with respect to premiums charged for, or dividends or other benefits payable under, an insurance policy;
- 23 (2) an insurer or an insurer's agent may not make an 24 insurance contract or an agreement relating to that insurance, 25 other than as expressed in the policy; and
 - (3) an insurer or an insurer's agent or other representative may not directly or indirectly pay, allow, or give, or offer to pay, allow, or give, as an inducement to the insured, a rebate payable on the policy or a special favor or advantage in the dividends or other benefits to accrue, or anything of value, not specified in the policy. (V.T.I.C. Art. 5.09, Sec. (a) (part).)

32 Source Law

Art. 5.09. (a) Except as provided by Subsection (b) of this article, no insurer . . . shall, in its business in this State, make or permit any distinction or discrimination in favor of the insured having a like hazard, in the matter of the charge of premiums for insurance, or in dividends or other benefits payable under any policy, nor shall any such insurer or agent make any contract of insurance, or agreement as to such insurance, other than expressed in the policy, nor shall any such insurer or its agents or representatives pay, allow or give, or offer to pay, allow or give, directly or indirectly, as an inducement to insured, any rebate payable upon the policy or any special favor or advantage in dividends or other benefits to accrue, or anything of value whatsoever, not specified in the policy; . . .

Revised Law

Sec. 1806.054. OTHER PROHIBITED INDUCEMENTS. Except as provided by Section 1806.055, 1806.056, or 1806.057, an insurer or an insurer's officer, director, agent, or other representative may not, for the purpose of writing the insurance of an insured, grant to the insured or contract with the insured for a special favor or advantage in dividends or other profits, or commissions or dividends of commissions or profits to accrue on the policy, or compensation or other valuable consideration not specified in the policy, or an inducement not specified in the policy. (V.T.I.C. Art. 5.08, Sec. (a) (part).)

12 <u>Source Law</u>

Art. 5.08. (a) Except as provided by this article, it shall be unlawful for any insurer, . . . or its officers, directors, general agent, state agents, special agents, local agents or other representatives, to grant to or contract with insured for any special favor or advantage in dividends or other profits, or any commissions or dividends of commissions or profits to accrue thereon, or any compensation or any valuable consideration not specified in the policy contract, or any inducement not specified in the policy contract, for the purpose of writing the insurance of any insured.

Revisor's Note

- (1) Section (a), V.T.I.C. Article 5.08, refers to the "general agent, state agents, special agents, [and] local agents" of an automobile insurer. The terms are obsolete terms that describe the types of agents that may represent an automobile insurer. Therefore, the revised law omits "general agent," "state agents," "special agents," and "local agents" as obsolete terms that are included within the meaning of "agent or other representative." Similar changes have been made throughout this chapter.
- (2) Section (a), V.T.I.C. Article 5.08, refers to an insurance "policy contract." The revised law substitutes the term "policy" for "policy contract" because a contract between an insurer and an insured is

- 1 more commonly referred to as a policy. Similar changes
- 2 have been made throughout this chapter.

3 Revised Law

- 4 Sec. 1806.055. PROFIT SHARING AUTHORIZED; CERTAIN
- 5 PROHIBITIONS. (a) Section 1806.054 does not prohibit an insurer
- 6 from sharing earned profits with the insurer's policyholders under
- 7 a profit sharing agreement contained in the policy if:
- 8 (1) the insurer shares profits uniformly among those
- 9 insured under the policy; and
- 10 (2) the insurer distributes earnings equitably among
- 11 those insureds under the terms of the policy.
- 12 (b) An insurer may not:
- 13 (1) discriminate in the distribution of profits among
- insureds of the same class;
- 15 (2) distribute the profit to an insured before the
- 16 expiration of the policy; or
- 17 (3) establish a class of insureds for the distribution
- of profits, except on the commissioner's approval.
- 19 (c) A violation of this section is unjust discrimination and
- 20 rebating.

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- 21 (d) The commissioner may revoke the certificate of
- 22 authority of an insurer that violates this section or the license of
- 23 an agent who violates this section. (V.T.I.C. Art. 5.08, Sec. (b).)

24 Source Law

Nothing in this article, however, shall be construed to prohibit an insurer from sharing its profits after the same have been earned with its policyholders under and in accordance with an agreement as to such profit sharing contained in its policy contract. Any profit sharing under any policy with insured shall be uniform as between such insured, and shall consist only and solely of an equitable distribution under and in accordance with the terms of $% \left(1\right) =\left(1\right) +\left(1\right) +\left$ the policy of earnings between such insured, and no such insurer shall discriminate in any distribution of profits between insured of a class, and no classes for such distribution shall be made or established except on the approval of the commissioner. No part of any profit shall be distributed to any insured under any on the approval of the commissioner. expiration of the the policy such policy until Any of violation contract. of the terms subsection shall constitute unjust discrimination and shall constitute rebating, and shall be sufficient grounds for the revocation of the permit of the insurer or of the license of the agent being guilty of such unjust discrimination and rebating.

Revisor's Note

- (1) Section (b), V.T.I.C. Article 5.08, refers to insurers sharing earned profits with policyholders "under and in accordance with" a profit sharing agreement and the policy. The revised law omits "in accordance with" as included within the meaning of "under."
- (2) Section (b), V.T.I.C. Article 5.08, refers to classes of insureds "made or established" by an insurer. The reference to "made" is omitted from the revised law because the terms are synonymous and the latter is more commonly used.
- (3) Section (b), V.T.I.C. Article 5.08, refers to an insurer's "permit." Throughout this chapter, the revised law substitutes "certificate of authority" for "permit" because, in this context, "certificate of authority" is the term used throughout this code in relation to an entity's authority to engage in business.

23 <u>Revised Law</u>

- Sec. 1806.056. PROFIT SHARING BASED ON COMBAT DUTY AUTHORIZED. (a) This subchapter does not prohibit an insurer, on approval by the commissioner, from distributing to policyholders who are on active duty in the United States Armed Forces any estimated profits resulting from service by those policyholders in a foreign country in a combat theater of operations after January 1, 1990.
- 31 (b) An insurer that elects to make distributions under this 32 section must:
- 33 (1) file a written description of the insurer's 34 distribution program with the commissioner for approval; and
- 35 (2) notify the commissioner in writing of each

- 1 distribution made under the program.
- 2 (c) If the commissioner does not act on the insurer's
- 3 distribution program on or before the fifth business day after the
- 4 date the commissioner receives the insurer's description of the
- 5 program, the distribution program is considered approved.
- 6 (d) An insurer may distribute estimated profits among
- 7 policyholders under this section based on:
- 8 (1) the time served by a policyholder in a combat
- 9 theater of operations;
- 10 (2) the location of the policyholder's military
- 11 service;
- 12 (3) the duration of the applicable insurance policy;
- 13 or

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- 14 (4) any other reasonable basis. (V.T.I.C. Art. 5.08,
- 15 Sec. (c); Art. 5.09, Sec. (b).)

16 <u>Source Law</u>

17 [Art. 5.08]

(c) This article does not prohibit an insurer, on approval by the commissioner, from distributing to policyholders who are on active duty in the United States Armed Forces any estimated profits resulting from service by those policyholders in any foreign country in a combat theater of operations at any time after January 1, 1990. An insurer that elects to make such distributions shall file a written description of its distribution program with the commissioner for approval by the commissioner and shall notify commissioner in writing of each distribution made The insurer may distribute the under the program. estimated profits among those policyholders based on the length of time served by a policyholder in a combat theater of operations, the location of the military service, the duration of the applicable insurance or any other reasonable basis. commissioner shall act on the insurer's distribution program within five business days of receipt of the insurer's distribution program, otherwise distribution program shall be deemed approved.

[Art. 5.09]

(b) This article does not prohibit an insurer, on approval by the Board, from distributing to policyholders who are on active duty in the United States Armed Forces any estimated profits resulting from service by those policyholders in any foreign country in a combat theater of operations at any time after January 1, 1990. An insurer that elects to make such distributions shall file a written description of its distribution program with the Board for approval by the Board and shall notify the Board in writing of each distribution made under the program. The insurer

may distribute the estimated profits among those policyholders based on the length of time served by a policyholder in a combat theater of operations, the location of the military service, the duration of the applicable insurance policy, or any other reasonable basis. The Board shall act on the insurer's distribution program within five business days of receipt of the insurer's distribution program, otherwise the distribution program shall be deemed approved.

11 Revised Law

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- 12 Sec. 1806.057. PROFIT SHARING WITH MEMBERS OF CERTAIN 13 ASSOCIATIONS AUTHORIZED. (a) Section 1806.054 does not prohibit 14 an insurer, on approval by the commissioner, from sharing profits 15 with policyholders who are part of a group program established by a 16 nonprofit business association and who participate in the group 17 program because of membership in the association.
- 18 (b) An insurer that elects to make distributions under this section must:
- 20 (1) file a written description of the insurer's distribution program with the commissioner for approval; and
- 22 (2) notify the commissioner in writing of each 23 distribution made under the program.
 - (c) If the commissioner does not act on the insurer's distribution program on or before the fifth business day after the date the commissioner receives the insurer's description of the program, the distribution program is considered approved.
- 28 (V.T.I.C. Art. 5.08, Sec. (d) (part).)

29 Source Law

This article does not prohibit an insurer, on approval by the commissioner, from sharing profits with policyholders who are part of a group program established by a nonprofit business association and participate in the group program because of membership in the association. An insurer that elects to make distributions under this subsection shall file a written description of its distribution program with the commissioner for approval by the commissioner and shall notify the commissioner in writing of each distribution made under the program. The commissioner shall act on the insurer's distribution program within business days of receipt of the five insurer's distribution program, otherwise the distribution program shall be deemed approved. . . .

Revised Law

Sec. 1806.058. PARTICIPATING POLICIES. (a) This

- 1 subchapter, Subtitle C, and Subchapter A, Chapter 5, may not be
- 2 construed to prohibit:
- 3 (1) a stock company, mutual insurance company,
- 4 reciprocal or interinsurance exchange, or Lloyd's plan from
- 5 operating under this subchapter, Subchapter A, Chapter 5, and
- 6 Subtitle C; or

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- 7 (2) a stock company, mutual insurance company,
- 8 reciprocal or interinsurance exchange, or Lloyd's plan from issuing
- 9 participating policies.
- 10 (b) A distribution of profits or dividends to insureds may
- 11 not take effect or be paid until the commissioner approves the
- 12 distribution. The commissioner may not approve a distribution of
- 13 profits or dividends until the insurer has provided adequate
- 14 reserves. The reserves must be computed on the same basis for all
- 15 classes of insurers operating under this subchapter, Subtitle C,
- and Subchapter A, Chapter 5. (V.T.I.C. Art. 5.07.)

17 <u>Source Law</u>

Art. 5.07. Nothing in this subchapter shall be construed to prohibit the operation hereunder of any stock company, mutual company, reciprocal or interinsurance exchange or Lloyd's association or to prohibit any stock company, mutual company, reciprocal or interinsurance exchange or Lloyd's association issuing participating policies; provided no distribution of profit or dividends to insured shall take effect or be paid until the same shall have been approved by the Board; and provided further that no such distribution shall be approved until adequate reserves shall have been provided, such reserves to be computed on the same basis for all classes of insurers operating under this subchapter.

Revisor's Note

V.T.I.C. Article 5.07 refers to "this subchapter, " meaning Subchapter A, V.T.I.C. Chapter 5. Parts of that subchapter are revised in various chapters in this code, and of those parts, the relevant provisions are revised in this subchapter and Subtitle C, Title 10, of this code. For that reason, the revised law substitutes a reference t.o subchapter, Subtitle C, and Subchapter A, Chapter 5"

1	for the reference to "this subchapter."	
2	[Sections 1806.059-1806.100 reserved for expansion]	
3	SUBCHAPTER C. PROVISIONS APPLICABLE TO CASUALTY INSURANCE AND	
4	FIDELITY, GUARANTY, AND SURETY BONDS	
5	Revised Law	
6	Sec. 1806.101. DEFINITIONS. In this subchapter:	
7	(1) "Insurance" includes a suretyship.	
8	(2) "Policy" includes a bond. (V.T.I.C. Art. 5.20,	
9	Sec. (d).)	
10	Source Law	
11 12 13	(d) As used in this article the word "insurance" includes suretyship, and the word "policy" includes bond.	
14	Revised Law	
15	Sec. 1806.102. APPLICABILITY OF SUBCHAPTER. (a) Except as	
16	provided by Subsections (b) and (c), this subchapter applies to an	
17	insurer, including a corporation, reciprocal or interinsurance	
18	exchange, mutual insurance company, association, Lloyd's plan, or	
19	other organization, writing casualty insurance or writing	
20	fidelity, surety, or guaranty bonds, on risks or operations in this	
21	state.	
22	(b) This subchapter does not apply to:	
23	(1) a farm mutual insurance company or association	
24	regulated under Chapter 911; or	
25	(2) a county mutual insurance company regulated under	
26	Chapter 912.	
27	(c) This subchapter does not apply to the writing of:	
28	<pre>(1) automobile insurance;</pre>	
29	(2) life, health, or accident insurance;	
30	(3) professional liability insurance;	
31	(4) reinsurance;	
32	(5) aircraft insurance;	
33	(6) fraternal benefit insurance;	
34	(7) fire insurance;	
35	(8) workers' compensation insurance;	

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(9) marine insurance, including noncommercial inland
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     marine insurance and ocean marine insurance;
                 (10)
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                      title insurance;
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                      explosion insurance, except insurance against
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     loss from personal injury or property damage resulting accidentally
     from:
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                      (A)
                           a steam boiler;
                           a heater or pressure vessel;
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                      (B)
 9
                      (C)
                           an electrical device;
                           an engine; or
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                      (D)
                               machinery and appliances used
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                      (E)
                           all
     connection with or in the operation of a boiler, heater, vessel,
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     electrical device, or engine described by Paragraphs (A)-(D); or
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                       insurance coverage for any of the following
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     conditions or risks:
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                      (A)
                           weather or climatic conditions, including
     lightning, tornado, windstorm, hail, cyclone, rain, or frost and
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     freeze;
                           earthquake or volcanic eruption;
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                      (B)
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                      (C)
                           smoke or smudge;
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                      (D)
                           excess or deficiency of moisture;
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                      (E)
                           flood;
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                      (F)
                           the rising water of an ocean or an ocean's
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     tributary;
                           bombardment, invasion, insurrection, riot,
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                      (G)
     civil war or commotion, military or usurped power, or any order of a
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     civil authority made to prevent the spread of a conflagration,
     epidemic or catastrophe;
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                           vandalism or malicious mischief;
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                      (H)
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                      (I)
                           strike or lockout;
                           water or other fluid or substance resulting
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                      (J)
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     from:
                           (i)
                               the breakage or leakage of a sprinkler,
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pump, or other apparatus erected for extinguishing fire, or a water

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- 1 pipe or other conduit or container; or
- 2 (ii) casual water entering a building
- 3 through a leak or opening in the building or by seepage through
- 4 building walls; or
- 5 (K) accidental damage to a sprinkler, pump, fire
- 6 apparatus, pipe, or other conduit or container described by
- 7 Paragraph (J)(i). (V.T.I.C. Art. 5.13, Secs. (a) (part), (b),
- 8 (c).)

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9 <u>Source Law</u>

- Art. 5.13. (a) This subchapter applies to every insurance company, corporation, interinsurance exchange, mutual, reciprocal, association, Lloyd's plan, or other organization or insurer writing any of the characters of insurance business herein set forth, hereinafter called "Insurer"; provided that nothing in this entire subchapter shall be construed to apply to any county or farm mutual insurance company or association, as regulated under Chapters 911 and 912 of this code, . . .
- (b) This subchapter applies to the writing of casualty insurance and the writing of fidelity, surety, and guaranty bonds, on risks or operations in this State except as herein stated.
- (c) Except as otherwise provided by this subchapter, this subchapter does not apply to the writing of motor vehicle, life, health, accident, liability, aircraft, professional reinsurance, fraternal benefit, fire, lightning, tornado, windstorm, hail, smoke or smudge, cyclone, earthquake, Īire, volcanic eruption, rain, frost and freeze, weather or climatic conditions, excess or deficiency of moisture, flood, the rising of the waters of the ocean or its tributaries, bombardment, invasion, insurrection, riot, civil war or commotion, military or usurped power, any order of a civil authority made to prevent of conflagration, epidemic spread а catastrophe, vandalism or malicious mischief, strike water or other fluid or lockout, substance, resulting from the breakage or leakage of sprinklers, pumps, or other apparatus erected for extinguishing fires, water pipes or other conduits or containers, or resulting from casual water entering through leaks or opening in buildings or by seepage through building walls, including insurance against accidental injury of such sprinklers, pumps, fire apparatus, conduits or container, workers' compensation, noncommercial marine, marine, marine, inland ocean title οr insurance; nor does this subchapter apply to the writing of explosion insurance, except insurance does this subchapter apply against loss from injury to person or property which results accidentally from steam boilers, heaters or pressure vessels, electrical devices, engines and all machinery and appliances used in connection therewith or operation thereby.

Revisor's Note

(1) V.T.I.C. Article 5.13 refers to "this

- subchapter," meaning Subchapter B, V.T.I.C. Chapter 5. Subchapter B, Chapter 5, is revised in various chapters in this title. The revised law substitutes a reference to "this subchapter" of the revised law for the reference to "this subchapter" because the substance of Article 5.13 is repeated in each of the chapters of this title in which other articles from Subchapter B, V.T.I.C. Chapter 5, are revised.
- (2) Section (a), V.T.I.C. Article 5.13, states that the law revised in this subchapter does not apply to a "county or farm mutual insurance company or association, as regulated under Chapters 911 and 912 of this code." The only applicable references to an "association" are in Chapter 911 of this code, which regulates farm mutual insurance companies. The revised law is drafted accordingly.
- (3) Section (c), V.T.I.C. Article 5.13, states that "[e]xcept as otherwise provided by subchapter," meaning Subchapter B, V.T.I.C. Chapter 5, "this subchapter" does not apply to the writing of certain insurance, including "motor vehicle" insurance. The revised law omits the reference to "[e]xcept as otherwise provided by this subchapter" as unnecessary because the portions of Subchapter B, Chapter 5, that are revised in this subchapter do not contain any exception to the general statement of inapplicability.

<u>Revised Law</u>

- Sec. 1806.103. CONSTRUCTION OF SUBCHAPTER. (a) This subchapter does not limit in any manner the kinds or classes of insurance that an insurer may write under an appropriate statute or the insurer's charter or certificate of authority.
- (b) This subchapter may not be construed to prohibit the modification of rates by a rating plan that complies with Chapter

- 1 2251 or Article 5.13-2, as applicable. (V.T.I.C. Art. 5.13, Sec.
- 2 (d); Art. 5.20, Sec. (b) (part).)

Source Law

[Art. 5.13]

(d) This subchapter shall not be construed as limiting in any manner the types or classes of insurance which may be written by the several types of insurers under appropriate statutes or their charters or permits.

[Art. 5.20]

(b) ... provided further, that nothing in this subchapter shall be construed to prohibit the modification of rates by any rating plan authorized under this subchapter.

Revisor's Note

- (1) Section (d), V.T.I.C. Article 5.13, refers to "[t]his subchapter," meaning Subchapter B, V.T.I.C. Chapter 5. The revised law substitutes a reference to "this subchapter" of the revised law for "[t]his subchapter" for the reason stated in Revisor's Note (1) to Section 1806.102.
- (2) Section (b), V.T.I.C. Article 5.20, states that "this subchapter," meaning Subchapter B, V.T.I.C. Chapter 5, may not be construed to prohibit the modification of rates by a "rating plan authorized under this subchapter." The revised law substitutes a reference to "this subchapter" of the revised law for the first reference to "this subchapter" because the only provisions of Subchapter B, Chapter 5, that could be construed to prohibit the modification of rates by a rating plan are revised in this subchapter.

In addition, the revised law substitutes a reference to a "rating plan that complies with Chapter 2251 or Article 5.13-2, as applicable," for the reference to a "rating plan authorized under this subchapter" for accuracy. In 2003, under Chapter 206, Acts of the 78th Legislature, Regular Session, the legislature amended Section 2(a), V.T.I.C. Article

5.13-2, revised in this code in Section 2251.003, to expand the application of Article 5.13-2 to the kinds casualty insurance and fidelity, surety, quaranty bonds to which this subchapter applies, and that article governs rates for that insurance and those bonds, including the authority to use a rating plan. Therefore, a rating plan authorized under Subchapter B, Chapter 5, means a rating plan authorized under Article 5.13-2. The provisions of that article that are revised are contained in Chapter 2251 of this code. Although that chapter contains other provisions that are derived from V.T.I.C. Article 5.13-2C, the revised appropriately refers to the chapter in its entirety because the provisions that are derived from Article 5.13-2C do not relate to rating plans for casualty insurance and fidelity, guaranty, or surety bonds. In addition, the revised law substitutes "complies with" for "authorized under" to accurately reflect the regulatory system established under Article 5.13-2 as explained in Revisor's Note (2) to Section 1806.052.

Revised Law

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Sec. 1806.104. PROHIBITED ACTS. (a) Except as otherwise provided by this subchapter, an insurer, an insurer's employee, or a broker or agent may not knowingly:

- (1) issue an insurance policy that is not in accordance with an applicable filing that is filed and in effect under Chapter 2251 or 2301 or Article 5.13-2; or
- 29 (2) charge, demand, or receive a premium on an 30 insurance policy that is not in accordance with an applicable 31 filing that is filed and in effect under Chapter 2251 or 2301 or 32 Article 5.13-2.
- 33 (b) Except as provided in an applicable filing that is filed 34 and in effect under Chapter 2251 or 2301 or Article 5.13-2, an 80C30 KLA-D 831

directly or indirectly pay, allow, or give, or offer to pay, allow, or give, as an inducement to insurance, or after insurance has been written, a rebate, discount, abatement, credit or reduction of the

insurer, an insurer's employee, or a broker or agent may not

- 5 premium stated in an insurance policy, or a special favor or
- 6 advantage in the dividends or other benefits to accrue on the
- 7 policy, or any valuable consideration or inducement, not specified
- 8 in the policy.

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- 9 (c) An insured named in an insurance policy or an employee 10 of an insured may not knowingly receive or accept, directly or 11 indirectly, a rebate, discount, abatement, credit, or reduction of 12 the premium stated in an insurance policy, or a special favor or 13 advantage or valuable consideration or inducement. (V.T.I.C. Art.
- 14 5.20, Sec. (a).)

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15 <u>Source Law</u>

Art. 5.20. (a) Except as provided by this article, no insurer or employee thereof, and no broker or agent shall knowingly issue any policy of insurance nor charge, demand or receive a premium thereon except in accordance with the applicable filing which has been approved by the commissioner. No insurer or employee thereof, and no broker or agent shall pay, allow or give, or offer to pay, allow, or give, directly or indirectly, as an inducement to insurance, after insurance has been effected, any rebate, discount, of abatement, credit or reduction premium named in a policy of insurance, or any special favor or advantage in the dividends or other benefits to accrue thereon, or any valuable consideration or inducement whatever, not specified in the policy of insurance, except to the extent provided for in such applicable filing. No insured named in a policy of insurance, nor any employee of such insured shall knowingly receive or account directly and insured shall knowingly receive or accept, directly or indirectly, any such rebate, discount, abatements, or reduction of premium, or any special favor or advantage or valuable consideration or inducement.

Revisor's Note

(1) Section (a), V.T.I.C. Article 5.20, prohibits issuing an insurance policy or charging, demanding, or receiving a premium on an insurance policy "except in accordance with the applicable filing which has been approved by the commissioner" and prohibits any inducement to insurance "except to

the extent provided for in such applicable filing." As explained in Revisor's Note (2) to Section 1806.103, V.T.I.C. Article 5.13-2, the portions of which that are revised are contained in Chapters 2251 and 2301 of this code, governs rates and forms for the kinds of casualty insurance and surety, fidelity, and guaranty bonds to which this subchapter applies. Under the provisions of that article revised in Chapters 2251 2301, rates and forms are filed with commissioner of insurance and, under most circumstances, may be used unless disapproved by the commissioner. For accuracy, the revised substitutes references to a filing "that is filed and in effect under Chapter 2251 or 2301 or Article 5.13-2" for the references to the "filing which has been approved by the commissioner" and "such . . . filing." Although Chapter 2251 contains provisions that are derived from V.T.I.C. Article 5.13-2C, and Chapter 2301 contains provisions that are derived from V.T.I.C. Article 5.145, the revised law appropriately refers to those chapters in their entirety because the provisions that are derived from Articles 5.13-2C and 5.145 do not relate to casualty insurance or fidelity, surety, or quaranty bonds.

(2) Section (a), V.T.I.C. Article 5.20, refers to a "rebate, discount, abatement, credit or reduction" of premiums and subsequently refers to "any such rebate, discount, abatements, or reduction" of premiums. The revised law substitutes the former phrase for the latter phrase for consistency and because it is clear from the context that the two phrases are intended to have the same meaning.

Revised Law

Sec. 1806.105. PROFIT SHARING AUTHORIZED; CERTAIN

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- 1 PROHIBITIONS. (a) This subchapter does not prohibit an insurer
- 2 from sharing earned profits with the insurer's policyholders in
- 3 accordance with a profit sharing agreement contained in the policy,
- 4 provided that any profit sharing under the policy with those
- 5 insureds must be uniform among the insureds and may consist only of
- 6 the equitable distribution of earnings among the insureds in
- 7 accordance with the terms of the policy.
- 8 (b) An insurer may not:
- 9 (1) discriminate in the distribution of profits among
- 10 insureds of the same class;
- 11 (2) distribute the profit to an insured before the
- 12 expiration of the policy; or
- 13 (3) establish a class of insureds for the distribution
- of profits, except on the commissioner's approval.
- 15 (c) A distribution of profits or dividends to an insured may
- 16 not take effect or be distributed until:
- 17 (1) adequate reserves are provided, as computed on the
- 18 same basis for all classes of insurers to which this subchapter
- 19 applies; and

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- 20 (2) the commissioner approves the distribution.
- 21 (V.T.I.C. Art. 5.20, Sec. (b) (part).)

22 <u>Source Law</u>

Nothing in this article, however, shall be construed to prohibit an insurer from sharing its profits after the same have been earned with policyholders under and in accordance with its with agreement as to such profit sharing contained in its policy contract. Any profit sharing under any policy with insured shall be uniform as between such insured, and shall consist only and solely of the equitable distribution under and in accordance with the terms of the policy of earnings between such insured, and no such insurer shall discriminate in any distribution of profits between insured of a class, and no classes for such distribution shall be made or established except No part of any on the approval of the commissioner. profit shall be distributed to any insured under any the policy such policy until expiration of the contract, provided no distribution of profits or dividends to insured shall take effect or be paid until profits the same shall have been approved by the commissioner; and provided further, that no such distribution shall be approved until adequate reserves shall have been provided, such reserves to be computed on the same basis for all classes of insurers operating under this

1 subchapter...

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2 <u>Revisor's Note</u>

- (1) Section (b), V.T.I.C. Article 5.20, refers to insurers sharing earned profits with policyholders "under and in accordance with" a profit sharing agreement and the policy. The revised law omits "in accordance with" for the reason stated in Revisor's Note (1) to Section 1806.055.
- (2) Section (b), V.T.I.C. Article 5.20, refers to profits being "paid." The revised law substitutes "distributed" for "paid" for consistency of terminology throughout this chapter and because the terms are synonymous and the former is more commonly used.

15 Revised Law

- PROFIT SHARING WITH CERTAIN ASSOCIATIONS Sec. 1806.106. 16 17 AUTHORIZED. (a) This subchapter does not prohibit an insurer, on 18 approval by the commissioner, from sharing profits with 19 policyholders who are part of a group program established by a nonprofit business association and who participate in the group 20 program because of membership in the association. 21
- 22 (b) An insurer that elects to make distributions under this section must:
- 24 (1) file a written description of the insurer's 25 distribution program with the commissioner for approval; and
- 26 (2) notify the commissioner in writing of each 27 distribution made under the program.
- (c) If the commissioner does not act on the insurer's distribution program on or before the fifth business day after the date the commissioner receives the insurer's description of the program, the distribution program is considered approved.
- 32 (V.T.I.C. Art. 5.20, Sec. (c) (part).)

33 Source Law

34 (c) This article does not prohibit an insurer, 35 on approval by the commissioner, from sharing profits

1 with policyholders who are part of a group program 2 3 4 5 6 7 established by a nonprofit business association and who participate in the group program because of membership in the association. An insurer that elects to make distributions under this subsection shall file a written description of its distribution program with the commissioner for approval by the commissioner and 8 shall notify the commissioner in writing of each 9 program. distribution made under the Ιf 10 not insurer's commissioner does act the on distribution program within five business days of 11 receipt of the insurer's distribution program, the 12 13 distribution program is considered approved. . . . 14 Revised Law Sec. 1806.107. ENFORCEMENT. 15 (a) A violation of this subchapter is unjust discrimination and rebating. 16 17 (b) The commissioner may revoke the certificate of18 authority of an insurer that violates this subchapter or the 19 license of an agent who violates this subchapter. (V.T.I.C. Art. 5.20, Sec. (b) (part).) 20 21 Source Law (b) . . Any violation of the terms of this article shall constitute unjust discrimination and $% \left(1\right) =\left\{ 1\right\} =\left\{ 1$ 22 23 shall constitute rebating, and shall be sufficient grounds for the revocation of the permit of the insurer 24 25 or of the license of the agent being guilty of such 26 27 unjust discrimination and rebating; . Revisor's Note (End of Subchapter) 28 29 Section (e), V.T.I.C. Article 5.13, states that 30 the regulatory power conferred in this subchapter is 31 32 vested in the commissioner of insurance. The revised 33 law omits this statement as unnecessary. Section 34 31.021 of this code provides that the commissioner "is the department's chief executive and administrative 35 36 officer" and "has the powers and duties vested in the department by this code." The omitted law reads: 37 38 power The regulatory herein 39 conferred is vested in the commissioner. [Sections 1806.108-1806.150 reserved for expansion] 40 SUBCHAPTER D. PROVISIONS APPLICABLE TO FIRE INSURANCE 41

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Sec. 1806.151. APPLICABILITY OF SUBCHAPTER.

AND ALLIED LINES

Revised Law

(a)

Each

- 1 insurance policy or contract insuring property in this state
- 2 against loss by fire, including a policy or contract or portion of a
- 3 policy or contract that insures the shore end of a marine risk
- 4 against loss by fire, must be issued in accordance with:
- 5 (1) this subchapter;
- 6 (2) Section 403.002;
- 7 (3) Subchapter C, Chapter 5;
- 8 (4) Subchapter H, Chapter 544; and
- 9 (5) Chapters 252, 2001, 2002, 2003, 2004, 2005, 2006,
- 10 and 2171.
- 11 (b) An insurer issuing an insurance policy or contract
- 12 described by Subsection (a), including a fire insurance company,
- 13 marine insurance company, fire and marine insurance company, and
- 14 fire and tornado insurance company, is governed by the laws
- 15 described by Subsection (a).
- 16 (c) This section applies to an insurer or to an insurance
- 17 policy or contract regardless of:
- 18 (1) the kind and character of property insured;
- 19 (2) whether the property is:
- 20 (A) fixed or movable;
- 21 (B) stationary or in transit; or
- (C) consigned or billed for shipment inside or
- outside the boundaries of this state or to a foreign country;
- 24 (3) whether the insurer is organized:
- 25 (A) under the laws of this state, another state,
- 26 territory, or possession of the United States, or a foreign
- 27 country; or
- 28 (B) by authority of the federal government; or
- 29 (4) the kind of insurer or the name of the insurer
- 30 issuing the policy or contract. (V.T.I.C. Art. 5.27 (part).)
- 31 Source Law
- Art. 5.27. Every fire insurance company, every marine insurance company, every fire and marine insurance company, every fire and tornado insurance company, and each and every insurance company of every kind and name issuing a contract or policy of

1 insurance, or contracts or policies of insurance 2345678 against loss by fire on property within this State, whether such property be fixed or movable, stationary or in transit, or whether such property is consigned or billed for shipment within or beyond the boundary of this State or to some foreign county, whether such company is organized under the laws of this State or under the laws of any other state, territory or possession of the United States, or foreign country, 9 by authority of the Federal Government, [now 10 holding certificate of authority to transact business 11 in this State, shall be deemed to have accepted such 12 certificate and to transact business thereunder, upon 13 condition that it consents to the terms and provisions 14 of this subchapter and that it agrees to transact 15 business in this State, subject thereto;] it being 16 17 intended that every contract or policy of insurance 18 against the hazard of fire shall bе issued 19 accordance with the terms and provisions of this subchapter, and the company issuing the same governed 20 21 thereby, regardless of the kind and character of such property and whether the same is fixed or movable, 22 23 stationary or in transit, including the shore end of 24 all marine risks insured against loss by fire.

Revisor's Note

- (1) V.T.I.C. Article 5.27 refers to a foreign "county." It is clear from the context that "county" is a typographical error and that the legislature intended to refer to a foreign "country." The revised law is drafted accordingly.
- (2) V.T.I.C. Article 5.27 requires insurance policy and an insurer that issues a fire insurance policy to comply with "this subchapter," meaning Subchapter C, V.T.I.C. Chapter 5. Included in Subchapter C, Chapter 5, were V.T.I.C. Articles 5.43-4, 5.44, 5.49, 5.53, and 5.54. Article 5.43-4 was revised in 1999 as Chapter 2154, Occupations Code, Article 5.44 was revised in 1987 as Section 417.008, Government Code, and Article 5.49 was revised, effective April 1, 2005, in part in Chapter 251 of this In addition, Articles 5.53 and 5.54 are revised in part as Chapter 1807 of this code. The revised law does not reference the statutes revising those articles because those provisions do not regulate fire insurance policies or insurers with respect to issuing those policies.

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1 Revised Law

- Sec. 1806.152. CONSTRUCTION OF SUBCHAPTER. (a) This subchapter, Subtitle D, and Subchapter C, Chapter 5, may not be construed to deal with the collection of premiums, but each insurer may make rules and regulations the insurer considers just between
- 7 (b) A bona fide extension of credit may not be construed as 8 discrimination or as a violation of this subchapter. (V.T.I.C. 9 Art. 5.42 (part).)

the insurer and the insurer's agents and policyholders.

10 <u>Source Law</u>

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Art. 5.42. The provisions of this subchapter shall not deal with the collection of premiums, but each company shall be permitted to make such rules and regulations as it may deem just between the company, its agents, and its policyholders; and no bona fide extension of credit shall be construed as a discrimination, or in violation of the provisions of this subchapter. . . .

Revisor's Note

V.T.I.C. Article 5.42 states that a bona fide extension of credit may not be construed as discrimination or as a violation of "this subchapter," meaning Subchapter C, V.T.I.C. Chapter 5. Subchapter C, Chapter 5, is revised in various chapters in this code. The only provisions of Subchapter C that could be interpreted to prohibit a bona fide extension of credit are revised in this subchapter. The revised law is drafted accordingly.

Revised Law

- Sec. 1806.153. UNJUST DISCRIMINATION; REBATES. (a) An insurer or an insurer's officer, director, agent, or other representative may not grant or contract for a special favor or advantage in:
- (1) dividends or other profits to accrue on an insurance policy;
- 36 (2) commissions in the dividends or other profits to 37 accrue on an insurance policy;

- (3) commissions or division of commission; or
- 2 (4) a position, valuable consideration, or inducement
- 3 not specified in an insurance policy.

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- 4 (b) An insurer may not directly or indirectly give, sell, or
- 5 purchase or offer to give, sell, or purchase as an inducement to
- 6 insurance or in connection with insurance:
- 7 (1) stocks, bonds, or other securities of an insurer
- 8 or other corporation, partnership, or individual;
- 9 (2) dividends or profits that have accrued or will
- 10 accrue on stocks, bonds, or other securities of an insurer or other
- 11 corporation, partnership, or individual; or
- 12 (3) anything of value not specified in the policy.
- 13 (c) An insurer or an insurer's officer, director, agent, or
- 14 other representative that violates this section has engaged in
- unjust discrimination. (V.T.I.C. Art. 5.41, Sec. (a) (part).)

16 <u>Source Law</u>

. . . [nor shall any such company knowingly write insurance . . .] it shall be unlawful for any company, or its officers, directors, general agents, state agents, special agents, local agents, or its representatives, to grant or contract for any special favor or advantages in the dividends or other profits to come thereon, or in commissions in the dividends or other profits to accrue thereon, or in commissions or division of commission, or any position or any valuable consideration or any inducement not specified in the policy contract of insurance; nor shall such company give, sell or purchase, offer to give, sell or purchase, directly or indirectly, as an inducement to insure or in connection therewith, any stocks, bonds or other securities of any insurance company or other corporation, partnership individual, or or any dividends or profits accrued or to accrue thereon, or anything of value whatsoever, not specified in the policy. . . Any company, or any of its officers, directors, general agents, state agents, special agents, local agents or its representatives, doing any of the acts in this article prohibited, shall be deemed guilty of unjust discrimination. .

Revisor's Note

Section (a), V.T.I.C. Article 5.41, refers to the "general agents, state agents, special agents, [and] local agents" of an insurer. The revised law omits the references to those agents for the reason stated in Revisor's Note (1) to Section 1806.054.

1	Revised Law

- 2 Sec. 1806.154. PROFIT SHARING AUTHORIZED. (a) Section
- 3 1806.153 does not prohibit an insurer from sharing profits with the
- 4 insurer's policyholders if:
- 5 (1) a profit sharing agreement is placed on or in the
- 6 face of the policy;

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- 7 (2) the profit sharing is uniform and does not
- 8 discriminate among individuals or among classes; and
- 9 (3) the profit is not distributed to an insured before
- 10 the expiration of the insurance policy.
- 11 (b) An insurer or an insurer's officer, director, agent, or
- 12 other representative that violates this section has engaged in
- unjust discrimination. (V.T.I.C. Art. 5.41, Sec. (a) (part).)

14 Source Law

(a) . . . Nothing in this law shall be construed to prohibit a company from sharing its profits with its policyholders, if such agreement as to profit sharing shall be placed on or in the face of the policy, and such profit sharing shall be uniform and shall not discriminate between individuals or between classes. No part of the profit shall be paid until the expiration of the policy. . . .

Revisor's Note

- (1)Section (a), V.T.I.C. Article 5.41, states that "this law" may not be construed to prohibit an insurer from sharing profits with policyholders if certain requirements are satisfied. The only provision of this code that could be interpreted to prohibit insurer from sharing profits an with policyholders in this context is revised in this subchapter as Section 1806.153. The revised law is drafted accordingly.
- (2) Section (a), V.T.I.C. Article 5.41, refers to profits being "paid." The revised law substitutes "distributed" for "paid" for the reason stated in Revisor's Note (2) to Section 1806.105.

Revised Law

2 Sec. 1806.155. INSURER LIABILITY ON POLICY ISSUED WITHOUT 3 AUTHORITY. (a) If an insurer or an insurer's agent issues an insurance policy without authority and the policyholder sustains a 4 5 loss or damage covered under the policy, the insurer is liable to the policyholder under the policy in the same manner and to the same 6 7 extent as if the insurer had been authorized to issue the policy, although the policy was issued in violation of this code. 8

(b) This section may not be construed to give an insurer the authority to issue an insurance policy or contract other than as provided by this code. (V.T.I.C. Art. 5.41, Sec. (a) (part).)

Source Law

If any agent or company shall issue a policy without authority, and any policyholder holding such policy shall sustain a loss or damage thereunder, said company or companies shall be liable to the policyholder thereunder, in the same manner and to the same extent as if said company had been authorized to issue said policies, although the company issued said in violation of the provisions of this But this shall not be construed to give violation policy subchapter. any company the right to issue any contract or policy insurance other than as provided subchapter.

Revisor's Note

Section (a), V.T.I.C. Article 5.41, states that the provision, which provides consequences if an insurer or agent issues an insurance policy "without authority," may not be construed to give an insurer the authority to issue an insurance policy other than as provided in "this subchapter," meaning Subchapter C, V.T.I.C. Chapter 5. V.T.I.C. Article 5.41 was derived from Section 22, Chapter 106, Acts of the 33rd Legislature, Regular Session, 1913. As originally enacted, the provision referred to the issuance of a policy other than as provided in "this Act," meaning Chapter 106, which, at the time, was the entirety of insurance laws for this state. In that context, the reference intended to prevent Section 22 from being

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construed to allow an insurer to issue a policy without authority under the insurance laws. The reference was changed from "this Act" to "this subchapter" in the codification of Section 22 as V.T.I.C. Article 5.41 by Chapter 491, Acts of the 52nd Legislature, Regular Session, 1951. That Act was a nonsubstantive revision of the insurance laws of this state. The revised law substitutes "this code" for "this subchapter" to preserve the intent of the original enactment by referring to the entirety of the insurance laws for this state.

Revised Law

Sec. 1806.156. ACCEPTANCE OF REBATE OR OTHER INDUCEMENT; CRIMINAL PENALTY. (a) A person commits an offense if the person knowingly receives or accepts from an insurer, an insurer's agent, broker, or other representative, or any other person a rebate of premium payable on an insurance policy, or a special favor or advantage in dividends or other financial profits accrued or to accrue on the policy, or any valuable consideration, position or inducement not specified in the policy.

- (b) An offense under this section is punishable by:
- (1) a fine of not more than \$100;
 - (2) confinement in jail for not more than 90 days; or
- 24 (3) both a fine and confinement under this subsection.
- 25 (V.T.I.C. Art. 5.41-1.)

26 Source Law

Art. 5.41-1. Whoever shall knowingly receive or accept from any insurance company or from any of its agents, sub-agents, brokers, solicitors, employés, intermediaries or representatives, or any other person, any rebate of premium payable on policy, or any special favor or advantage in the dividends or other financial profits accrued or to accrue thereon, or any valuable consideration, position or inducement not specified in the policy of insurance, shall be fined not exceeding one hundred dollars or be imprisoned in jail not exceeding ninety days, or both.

Revisor's Note

39 (1) V.T.I.C. Article 5.41-1 refers to the

"agents, sub-agents, brokers, solicitors, employés, intermediaries or representatives" of an insurer. The revised law omits the reference to "sub-agents," because the meaning of that term is included within the meaning of "agent" and omits the references to "solicitors," "employés," and "intermediaries" because, in context, the meaning of those terms is included within the meaning of "representative."

(2) V.T.I.C. Article 5.41-1 refers to a punishment of being "imprisoned" in jail. The revised law refers to "confinement" in jail rather than imprisonment to conform to the terminology of the Penal Code.

Revisor's Note (End of Subchapter)

A portion of Section (a), V.T.I.C. Article 5.41, requires a company insuring property against loss or damage by fire to comply with the requirements of state law regulating that type of insurer. Each provision of this chapter, by its own terms, requires compliance by an insurer. V.T.I.C. Article 5.27, revised in relevant part in this chapter, specifies to which companies this chapter applies. Therefore, the revised law omits the portion of Article 5.41 as unnecessary. The omitted law reads:

Art. 5.41. (a) [No company shall engage or participate in the insuring or reinsuring of any property in this State against loss or damage by fire] except in compliance with the terms and provisions of this law; . . .

32 CHAPTER 1807. APPLICABILITY TO MARINE INSURANCE

- 34 Sec. 1807.002. INAPPLICABILITY OF CERTAIN LAWS TO

1	CHAPTER 1807. APPLICABILITY TO MARINE INSURANCE
2	Revised Law
3	Sec. 1807.001. DEFINITIONS. In this chapter:
4	(1) "Insurable property and interests" includes:
5	(A) goods, freights, and cargoes;
6	(B) merchandise;
7	(C) effects;
8	(D) disbursements;
9	(E) profits;
LO	(F) money, bullion, and precious stones;
L1	(G) securities;
L2	(H) choses in action;
L3	(I) evidences of debt;
L4	(J) valuable papers; and
L5	(K) bottomry and respondentia interests.
L6	(2) "Marine insurance" means:
L7	(A) insurance and reinsurance that covers:
L8	(i) loss or damage to:
L9	(a) a hull, vessel, or craft of any
20	kind, an aid to navigation, a dry dock, or a marine railway, whether
21	complete, under construction, or awaiting construction; or
22	(b) insurable property and interests
23	in respect to, appertaining to, or in connection with a risk or
24	peril of navigation, transit, or transportation:
25	(1) on or under a sea, lake, or
26	river or other water, in the air, or on land in connection with or
27	incident to export, import, or waterborne risks;
28	(2) while being assembled,
29	packed, crated, baled, compressed, or similarly prepared for
30	shipment;
31	(3) while awaiting shipment; or
32	(4) during any delay, storage,
33	or transshipment or reshipment incident to the initial shipment;
34	(ii) a marine builder or repairer risk;

3 (iv) a war risk regarding any insurable

4 property or interest described by this section; and

5 (B) insurance defined as marine insurance by

6 another statute, lawful custom, or rule adopted by the

commissioner. (V.T.I.C. Art. 5.53 (part).)

8 Source Law

Art. 5.53. The provisions of this article shall apply to all insurance which is now or hereafter defined by statute, by rules of the commissioner, or by lawful custom, as marine insurance. . . .

The term "Marine Insurance" shall mean and include insurance and reinsurance against any and all kinds of loss or damage to the following subject matters of insurance interest therein:

Marine Insurance. Hulls, vessels and craft of every kind, aids to navigation, dry docks and marine railways, including marine builders' and repairers' risks, and whether complete or in process of or awaiting construction; also all marine protection and indemnity risks; also all goods, freights, cargoes, merchandise, effects, disbursements, profits, moneys, bullion, precious stones, securities, choses in action, evidences of debt, valuable papers, bottomry and respondentia interests, and all other kinds of property and interests therein, in respect appertaining to or in connection with any and all risks or perils of navigation, transit or transportation on or under any seas, lakes, rivers, or other waters or in the air, or on land in connection with or incident to export, import or waterborne risks, or while being assembled, packed, crated, baled, compressed similarly prepared for such shipment or while awaiting the same, or during any delays, storage, transshipment or reshipment incident thereto, including the insurance of war risks in respect to any or all of the aforesaid subject matters of insurance.

40 Revised Law

Sec. 1807.002. INAPPLICABILITY OF CERTAIN LAWS TO MARINE

42 INSURANCE; EXCEPTION. (a) The following provisions do not apply to

43 marine insurance:

- 44 (1) Sections 36.002, 37.051, 403.002, 492.051, and
- 45 501.159;

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- 46 (2) Subchapter H, Chapter 544;
- 47 (3) Chapters 5, 252, 253, 493, 494, 1804, 1805, 1806,
- 48 and 2171; and
- 49 (4) Subtitles B, C, D, E, F, H, and I.

- (b) Subsection (a) does not apply to:
- 2 (1) a farm mutual insurance company operating under 3 Chapter 911;
- 4 (2) a mutual insurance company engaged in business
- 5 under Chapter 12, Title 78, Revised Statutes, before that chapter's
- 6 repeal by Section 18, Chapter 40, Acts of the 41st Legislature, 1st
- 7 Called Session, 1929, as amended by Section 1, Chapter 60, General
- 8 Laws, Acts of the 41st Legislature, 2nd Called Session, 1929, that
- 9 retains the rights and privileges under the repealed law to the
- 10 extent provided by those sections; or
- 11 (3) a county mutual insurance company operating under
- 12 Chapter 912. (V.T.I.C. Arts. 5.53 (part), 5.54 (part).)

13 Source Law

14 Art. 5.53. . . .

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The provisions of Chapter 5 of this code, other than this article, shall not apply to marine insurance as defined by this article.

Art. 5.54. Nothing in Articles . . . 5.53 of this subchapter shall ever be construed to apply to any farm mutual insurance company operating under Chapter 16 of this Code or to any company now operating under Chapter 12, of Title 78, which has heretofore been repealed. Nothing in Articles . . . 5.53 of this subchapter shall ever be construed to apply to any county mutual insurance company operating under Chapter 17 of this Code.

Revisor's Note

(1) V.T.I.C. Article 5.53 states in part that the provisions of V.T.I.C. Chapter 5 do not apply to marine insurance. Many provisions of Chapter 5, now revised in various parts of this code, could not be interpreted to apply to marine insurance by their own terms; others are simply inapplicable, as a practical matter, to marine insurance. The revised law, however, continues the references to all of the provisions previously contained in Chapter 5 unless the references are clearly inapplicable to marine insurance.

V.T.I.C. Articles 5.12, 5.24, 5.49, 5.68, and 5.91 were included in Chapter 5 and were revised,

effective April 1, 2005, in Chapters 251, 252, 253, 254, 255, and 256. The revised law does not reference Chapter 251 because it contains only provisions that have no effect except in relation to the other listed laws. The revised law does not reference Chapter 254, 255, or 256 because those laws apply by their own terms to motor vehicle insurance, workers' compensation insurance, and aircraft insurance, respectively, and could not be interpreted to apply to marine insurance.

Chapter 5 included V.T.I.C. Article 5.43-4, which was revised in 1999 as Chapter 2154, Occupations Code, and V.T.I.C. Article 5.44, which was revised in 1987 as Section 417.008, Government Code. Chapter 5 also includes V.T.I.C. Article 5.57A, revised as Chapter 406A, Labor Code. The revised law does not reference Section 417.008, Government Code, Chapter 2154, Occupations Code, or Chapter 406A, Labor Code, because those provisions could not be construed to apply to marine insurance.

V.T.I.C. Article 5.61, contained in Chapter 5, is revised as Chapter 426. The revised law does not reference Chapter 426 because that law applies to reserves for workers' compensation insurance companies and could not be interpreted to apply to marine insurance.

V.T.I.C. Article 5.54, contained in Chapter 5, provides that certain laws, including Subsection (a) of the revised law, do not apply to certain companies. Article 5.54 is revised in part in this section as Subsection (b). The revised law does not reference Subsection (b) because the reference would be nonsensical.

V.T.I.C. Article 5.75-1, contained in Chapter 5,

1		is revised as part of Section 492.051. The revised law
2		refers to that section in its entirety because the
3		other provisions of Section 492.051 apply to life
4		insurance companies and do not apply to marine
5		insurance.
6		(2) V.T.I.C. Article 5.54 refers to a farm
7		mutual insurance company operating under "Chapter 16
8		of this Code" and a county mutual insurance company
9		operating under "Chapter 17 of this Code." Chapters 16
10		and 17 were codified in 2001 as Chapters 911 and 912,
11		respectively. The revised law is drafted accordingly.
12		[Chapters 1808-1900 reserved for expansion]
13		SUBTITLE B. LIABILITY INSURANCE FOR PHYSICIANS AND
14		HEALTH CARE PROVIDERS
15		CHAPTER 1901. PROFESSIONAL LIABILITY INSURANCE FOR
16		PHYSICIANS AND HEALTH CARE PROVIDERS
17		SUBCHAPTER A. GENERAL PROVISIONS
18	Sec.	1901.001. DEFINITIONS
19	Sec.	1901.002. APPLICABILITY OF CHAPTER
20	Sec.	1901.003. APPLICABILITY OF OTHER LAW
21	Sec.	1901.004. ANNUAL REPORTS
22	Sec.	1901.005. RULES
23		[Sections 1901.006-1901.050 reserved for expansion]
24		SUBCHAPTER B. RATE STANDARDS
25	Sec.	1901.051. CONSIDERATIONS IN SETTING RATES
26	Sec.	1901.052. GROUPING OF RISKS
27	Sec.	1901.053. MODIFICATION OF CLASSIFICATION RATES 858
28	Sec.	1901.054. LIMITATIONS ON RATES
29	Sec.	1901.055. CLAIM SURCHARGE
30	Sec.	1901.056. ABSOLUTE RATES PROHIBITED859
31	Sec.	1901.057. CONSIDERATIONS IN APPROVING RATES861
32		[Sections 1901.058-1901.100 reserved for expansion]
33		SUBCHAPTER C. REVIEW OF RATES
34	Sec.	1901.101. RECONSIDERATION OF RATES AND PREMIUMS861

1	Sec. 1901.102. APPEAL
2	[Sections 1901.103-1901.150 reserved for expansion]
3	SUBCHAPTER D. BEST PRACTICES FOR NURSING HOMES
4	Sec. 1901.151. BEST PRACTICES
5	Sec. 1901.152. CONSIDERATION OF BEST PRACTICES IN
6	SETTING RATES
7	Sec. 1901.153. STANDARD OF CARE FOR CIVIL ACTIONS NOT
8	ESTABLISHED
9	[Sections 1901.154-1901.200 reserved for expansion]
10	SUBCHAPTER E. POLICY FORMS
11	Sec. 1901.201. STANDARDIZED POLICY FORMS; APPROVAL OF
12	OTHER FORMS
13	[Sections 1901.202-1901.250 reserved for expansion]
14	SUBCHAPTER F. COVERAGE
15	Sec. 1901.251. PREMIUM BASIS
16	Sec. 1901.252. COVERAGE FOR EXEMPLARY DAMAGES865
17	Sec. 1901.253. NOTICE OF PREMIUM INCREASE,
18	CANCELLATION, OR NONRENEWAL
19	CHAPTER 1901. PROFESSIONAL LIABILITY INSURANCE FOR
20	PHYSICIANS AND HEALTH CARE PROVIDERS
21	SUBCHAPTER A. GENERAL PROVISIONS
22	Revised Law
23	Sec. 1901.001. DEFINITIONS. In this chapter:
24	(1) "Health care provider" means:
25	(A) a person, partnership, professional
26	association, corporation, facility, or institution, or an officer,
27	employee, or agent of the person or entity acting in the course and
28	scope of authority, employment, or agency, as applicable, if the
29	person or entity is licensed or chartered by this state to provide
30	health care as:
31	(i) a registered nurse;
32	(ii) a hospital;
33	(iii) a dentist;
34	(iv) a podiatrist;

(v) a chiropractor;
(vi) an optometrist or therapeutic
optometrist;
(vii) a pharmacist;
(viii) a veterinarian;
(ix) a not-for-profit kidney dialysis
center;
(x) a blood bank that is a nonprofit
corporation chartered to operate a blood bank and is accredited by
the American Association of Blood Banks;
(xi) a for-profit or not-for-profit nursing
home; or
(xii) a for-profit or not-for-profit
assisted living facility; or
(B) a health care practitioner or facility that
the commissioner, in accordance with Section 2203.103(b),
determines is eligible for coverage under this chapter.
(2) "Hospital" means a public or private institution
licensed under Chapter 241 or 577, Health and Safety Code.
(3) "Physician" means a person licensed to practice
medicine in this state. (V.T.I.C. Art. 5.15-1, Sec. 2.)
Source Law
Sec. 2. In this article: (1) "Physician" means a person licensed to practice medicine in this state. (2) "Health care provider" means any person, partnership, professional association, corporation, facility, or institution licensed or chartered by the State of Texas to provide health care as a registered nurse, hospital, dentist, podiatrist, chiropractor, optometrist, pharmacist, veterinarian, not-for-profit kidney dialysis center, blood bank that is a nonprofit corporation chartered to operate a blood bank and which is accredited by the American Association of Blood Banks, for-profit nursing home or not-for-profit nursing home, for-profit assisted living facility or not-for-profit assisted living facility, or an officer, employee, or agent of any of them acting in the course and scope of his employment, or a health care practitioner or facility that the commissioner, in accordance with Section 3B(b), Article 21.49-3, of this code, determines is eligible for coverage under this article. (3) "Hospital" means a licensed public or private institution as defined in Chapter 241, Health

and Safety Code, or in Section 88, Chapter 243, Acts of the 55th Legislature, Regular Session, 1957 (Article 5547-88, Vernon's Texas Civil Statutes).

Revisor's Note

(1) Section 2, V.T.I.C. Article 5.15-1, provides definitions applicable to "this article," meaning V.T.I.C. Article 5.15-1, which is revised in this chapter. Although other provisions of this chapter are derived from V.T.I.C. Article 5.15-4, the revised law substitutes "this chapter" for "this article" in this context because the terms defined in Section 2 are not used in Article 5.15-4.

In addition, subsequent provisions of Article including Section 2(2), revised in this section, refer to "this article." Article 5.15-1 applies to professional liability insurance for physicians and health care providers, including the setting of rates for that kind of insurance. 2(2) defines "health care provider" to include a nursing home. Article 5.15-4, revised in this chapter as Subchapter D, in part governs the consideration of best practices for nursing homes in setting rates for professional liability insurance for nursing homes. Because both Articles 5.15-1 and 5.15-4 apply to the setting of rates for professional liability insurance for nursing homes and the articles must, therefore, be read in conjunction with respect to that kind of insurance, it is appropriate throughout this chapter substitute references to "this chapter" references to "this article" in Article 5.15-1. The revised law is drafted accordingly.

(2) Section 2(2), V.T.I.C. Article 5.15-1, defines "health care provider" to include an "optometrist." The revised law adds "therapeutic optometrist" for consistency with the terminology used

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in Chapter 351, Occupations Code, which governs the practice of optometry, and because Section 351.003, Occupations Code, provides that a reference in a law of this state to an optometrist means an optometrist or therapeutic optometrist, unless the context clearly indicates otherwise.

(3) Section 2(3), V.T.I.C. Article 5.15-1, refers to Section 88, Chapter 243, Acts of the 55th Legislature, Regular Session, 1957 (Article 5547-88, Vernon's Texas Civil Statutes). Article 5547-88 was codified in 1991 in Chapter 577, Health and Safety Code, which governs the licensing of certain mental health facilities. The revised law is drafted accordingly.

15 Revised Law

Sec. 1901.002. APPLICABILITY OF CHAPTER. This chapter applies to:

- 18 (1) an insurer authorized to write or engaged in 19 writing professional liability insurance for a physician or health 20 care provider; and
- 21 (2) a rating organization acting on behalf of an 22 insurer described by Subdivision (1). (V.T.I.C. Art. 5.15-1, Sec. 23 1.)

24 Source Law

Art. 5.15-1

Sec. 1. This article shall apply to the making and use of insurance rates by every insurer licensed to write or engaged in writing professional liability insurance for any physician or any health care provider including rating organizations, acting on behalf of insurers.

Revisor's Note

(1) Section 1, V.T.I.C. Article 5.15-1, states that V.T.I.C. Article 5.15-1, which is revised in this chapter, applies to "the making and use of insurance rates" by an insurer authorized to write professional liability insurance for physicians or health care

providers. The revised law omits the quoted language because the article applies by its own terms to the making and use of insurance rates by an insurer to whom this chapter applies, and an additional statement to that effect is unnecessary. In addition, the revised law omits the quoted language as misleading because the article applies to the making and use of insurance forms as well as insurance rates. See, for example, Section 4(c), V.T.I.C. Article 5.15-1, revised in this chapter as Section 1901.201.

(2) Section 1, V.T.I.C. Article 5.15-1, refers to an insurer "licensed to write" professional liability insurance for physicians or health care providers. The revised law substitutes "authorized" for "licensed" because "certificate of authority" is the term used throughout this code in relation to an entity's authority to engage in business.

Revised Law

Sec. 1901.003. APPLICABILITY OF OTHER LAW. Chapters 2251 and 2301 and Article 5.13-2 apply to rates and forms for professional liability insurance for physicians and health care providers under this chapter. (V.T.I.C. Art. 5.15-1, Sec. 4(a).)

23 Source Law

Sec. 4. (a) The provisions of Article 5.13-2 of this code shall apply to the filing of rates and rating information required under this article.

Revisor's Note

Section 4(a), V.T.I.C. Article 5.15-1, states that V.T.I.C. Article 5.13-2, revised in part in Chapters 2251 and 2301 of this code, applies to the filing of rates and rating information required under V.T.I.C. Article 5.15-1, which is revised in this chapter. Article 5.13-2 applies by its own terms to both insurance rates and insurance forms for certain specified kinds of insurance, including the kinds of

insurance regulated under this chapter. The revised law is drafted to accurately reflect that applicability.

In addition, although Chapter 2251 is also derived in part from V.T.I.C. Article 5.13-2C and Chapter 2301 is also derived in part from V.T.I.C. Article 5.145, the revised law appropriately refers to both chapters in their entirety because Article 5.13-2C relates only to certain insurers writing residential property insurance and Article 5.145 relates only to personal automobile and residential property insurance; therefore, the provisions of Chapters 2251 and 2301 derived from Articles 5.13-2C and 5.145 are inapplicable by their own terms to rates and forms for the kinds of insurance regulated under this chapter.

17 Revised Law

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Sec. 1901.004. ANNUAL REPORTS. (a) An insurer that issues professional liability insurance policies covering physicians and health care providers shall file annually with the commissioner a report of:

- (1) all claims and the amounts of those claims;
- 23 (2) amounts of claims reserves;
- 24 (3) investment income of the insurer derived from 25 medical professional liability premiums;
- 26 (4) information relating to amounts of judgments and 27 settlements paid on claims; and
- 28 (5) other information required by the commissioner.
- 29 (b) The commissioner may promulgate a form on which the 30 information under Subsection (a) must be reported. The form must 31 require that the information be reported in an accurate manner and 32 be reasonably calculated to:
- 33 (1) facilitate interpretation; and
- 34 (2) protect the confidentiality of the physician or 80C30 KLA-D 855

1 health care provider. (V.T.I.C. Art. 5.15-1, Sec. 5.)

2 <u>Source Law</u>

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rule:

Each insurer who issues policies of professional liability insurance covering physicians and health care providers shall file annually with the State Board of Insurance a report of all claims and claims, amounts of claims amount οf reserves. investment income of the company derived from medical professional liability premiums, information relating to amounts of judgments and settlements paid on to amounts of judgments and settlements paid on claims, and other information required by the board. The board may formulate and promulgate a form on which this information shall be reported. The form shall be so devised as to require the information to be reported an accurate manner, reasonably calculated in to protect facilitate interpretation and to the confidentiality of the health care provider physician.

Revisor's Note

- (1) Section 5, V.T.I.C. Article 5.15-1, refers to the State Board of Insurance. Chapter 685, Acts of the 73rd Legislature, Regular Session, 1993, abolished the board and transferred its functions to the commissioner of insurance and the Texas Department of Insurance. Throughout this chapter, references to the board have been changed appropriately.
- (2) Section 5, V.T.I.C. Article 5.15-1, authorizes the State Board of Insurance, meaning the commissioner of insurance for the reason stated in Revisor's Note (1) to this section, to "formulate and promulgate" a form. The revised law omits "formulate" because "formulate" is included within the meaning of "promulgate."

34 Revised Law

35 Sec. 1901.005. RULES. The commissioner shall establish by

- 37 (1) criteria that insurers must follow in establishing 38 reconsideration procedures under Section 1901.101; and
- 39 (2) standards and procedures to be followed in the
- 40 review of rates and premiums by the commissioner. (V.T.I.C.
- 41 Art. 5.15-1, Sec. 4B(c).)

1	Source Law
2 3 4 5 6 7	(c) The State Board of Insurance by rule shall establish criteria to be followed by insurers in establishing reconsideration procedures under Subsection (a) of this section and standards and procedures to be followed in review of rates and premiums by the board.
8	[Sections 1901.006-1901.050 reserved for expansion]
9	SUBCHAPTER B. RATE STANDARDS
10	Revised Law
11	Sec. 1901.051. CONSIDERATIONS IN SETTING RATES. (a) In
12	setting rates, an insurer shall consider:
13	(1) past and prospective loss and expense experience
14	for all professional liability insurance for physicians and health
15	care providers written in this state, subject to Subsection (b);
16	(2) a reasonable margin for underwriting profit and
17	contingencies;
18	(3) investment income; and
19	(4) dividends or savings allowed or returned by the
20	insurer to the insurer's policyholders or members.
21	(b) If the department finds that the group or risk to be
22	insured is not of sufficient size to be credible, an insurer must
23	also consider in setting rates past and prospective loss and
24	expense experience for all professional liability insurance for
25	physicians and health care providers written outside this state.
26	(V.T.I.C. Art. 5.15-1, Sec. 3 (part).)
27	Source Law
28 29 30 31 32 33 34 35 36 37 38 39 40 41 42	Sec. 3. Rates shall be made in accordance with the following provisions: (a) Consideration shall be given to past and prospective loss and expense experience for all professional liability insurance for physicians and health care providers written in this state, unless the State Board of Insurance shall find that the group or risk to be insured is not of sufficient size to be deemed credible, in which event, past and prospective loss and expense experience for all professional liability insurance for physicians and health care providers written outside this state shall also be considered, to a reasonable margin for underwriting profit and contingencies, to investment income, to dividends or savings allowed or returned by insurers to their policyholders or members.

1	Revised Law
2	Sec. 1901.052. GROUPING OF RISKS. In setting rates, an
3	insurer may group risks by classification, rating schedule, or any
4	other reasonable method. (V.T.I.C. Art. 5.15-1, Sec. 3 (part).)
5	Source Law
6 7 8 9 10 11	Sec. 3. Rates shall be made in accordance with the following provisions: (c) For the establishment of rates, risks may be grouped by classifications, by rating schedules, or by any other reasonable methods
12	Revised Law
13	Sec. 1901.053. MODIFICATION OF CLASSIFICATION RATES. (a)
14	An insurer may modify classification rates to produce rates for
15	individual risks in accordance with rating plans that establish
16	standards for measuring variations in hazards or expense
17	provisions.
18	(b) The standards may measure any difference among risks
19	that can be demonstrated to have a probable effect on losses or
20	expenses. (V.T.I.C. Art. 5.15-1, Sec. 3 (part).)
21	Source Law
22 23 24	Sec. 3. Rates shall be made in accordance with the following provisions:
25 26 27 28 29 30 31 32	(c) Classification rates may be modified to produce rates for individual risks in accordance with rating plans which establish standards for measuring variations in hazards or expense provisions, or both. Those standards may measure any difference among risks that can be demonstrated to have a probable effect upon losses or expenses.
33	Revised Law
34	Sec. 1901.054. LIMITATIONS ON RATES. (a) Rates set under
35	this chapter may not be excessive or inadequate, as described by
36	this section, or unreasonable or unfairly discriminatory.
37	(b) A rate is not excessive unless:
38	(1) the rate is unreasonably high for the insurance
39	coverage provided; and
40	(2) a reasonable degree of competition does not exist
41	in the area with respect to the classification to which the rate

- 1 applies.
- 2 (c) A rate is not inadequate unless the rate is unreasonably
- 3 low for the insurance coverage provided and:
- 4 (1) is insufficient to sustain projected losses and
- 5 expenses; or
- 6 (2) the use of the rate has or, if continued, will have
- 7 the effect of destroying competition or creating a monopoly.
- 8 (V.T.I.C. Art. 5.15-1, Sec. 3 (part).)

9 <u>Source Law</u>

Sec. 3. Rates shall be made in accordance with the following provisions:

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(d) Rates shall be reasonable and shall not be excessive or inadequate, as defined in this subsection, nor shall they be unfairly discriminatory. No rate shall be held to be excessive unless the rate high for unreasonably the insurance coverage is provided and a reasonable degree of competition does not exist in the area with respect the classification to which the rate is applicable. No rate shall be held to be inadequate unless the rate is unreasonably low for the insurance coverage provided and is insufficient to sustain projected losses and expenses; or unless the rate is unreasonably low for the insurance coverage provided and the use of the rate or, if continued, will have the destroying competition or creating a monopoly.

28 Revised Law

- Sec. 1901.055. CLAIM SURCHARGE. A claim surcharge assessed by an insurer against a physician or health care provider under a professional liability insurance policy may be based only on claims actually paid by an insurer as a result of:
- 33 (1) a settlement; or
- 34 (2) an adverse judgment or decision of a court.
- 35 (V.T.I.C. Art. 5.15-1, Sec. 9.)

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36 Source Law

Sec. 9. A claim surcharge assessed by an insurer against a health care provider or physician under a professional liability insurance policy may be based only on claims actually paid by an insurer as a result of a settlement or an adverse judgment or an adverse decision of a court.

43 Revised Law

Sec. 1901.056. ABSOLUTE RATES PROHIBITED. (a) In this section, "absolute rates" means rates, rating plans, or rating

- 1 classifications that are filed under Chapter 2251 or Article 5.13-2
- 2 by an insurer or authorized rating organization and that are
- 3 required to be used, to the exclusion of all others, by each insurer
- 4 authorized to write policies.
- 5 (b) A provision of this chapter, Chapter 2251, or Article
- 6 5.13-2 relating to the regulation of rates, rating plans, and
- 7 rating classifications for professional liability insurance for
- 8 physicians and health care providers does not:
- 9 (1) give the commissioner the power to promulgate
- 10 uniform or absolute rates; or

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- 11 (2) prevent different insurers or organizations
- 12 authorized to file rates from filing different rates for risks in a
- 13 given classification or modified rates for individual risks made in
- 14 accordance with rating plans. (V.T.I.C. Art. 5.15-1, Sec. 4(b).)

15 <u>Source Law</u>

Nothing contained in this article or other (b) provisions of this subchapter concerning regulation of rates, rating plans, rating classifications shall, as applies to the writing of professional liability insurance for health care providers and physicians, give the board the power to uniform or absolute prescribe rates; nor shall anything therein be construed as preventing the filing of different rates for risks in a given classification modified rates for individual risks accordance with rating plans, as filed by different insurers or organizations authorized to file such rates. As used in this subsection, "absolute rates" means rates, rating classifications, or rating plans filed by an insurer or authorized rating organization in accordance with this subchapter and the rates, rating classifications, or rating plans so filed are required to be used, to the exclusion of all others, by each insurer lawfully engaged in writing policies.

Revisor's Note

Section 4(b), V.T.I.C. Article 5.15-1, refers to the filing and regulation of rates, rating plans, and rating classifications under "this subchapter," meaning Subchapter B, V.T.I.C. Chapter 5. The pertinent provisions of Subchapter B, Chapter 5, are contained in V.T.I.C. Article 5.13-2, revised in part in Chapter 2251 of this code, and the revised law is drafted accordingly. Although Chapter 2251 is also

derived in part from V.T.I.C. Article 5.13-2C, the 1 2 revised law refers to that chapter in its entirety for the reason stated in the revisor's note to Section 3 1901.003. 4 5 Revised Law Sec. 1901.057. CONSIDERATIONS ΙN APPROVING RATES. 6 Τn 7 approving rates under this chapter, the commissioner shall consider the impact of risk management courses taken by physicians and 8 9 health care providers in this state. (V.T.I.C. Art. 5.15-1, Sec. 3 10 (part).) 11 Source Law 12 Sec. 3. Rates shall be made in accordance with the following provisions: 13 14 (b) The State Board of Insurance shall consider the impact of risk management courses taken by physicians and health care providers in this state 15 16 17 in approving rates under this article. 18 19 20 [Sections 1901.058-1901.100 reserved for expansion] 21 SUBCHAPTER C. REVIEW OF RATES 22 Revised Law Sec. 1901.101. RECONSIDERATION OF RATES 23 AND 24 PREMIUMS. (a) Each insurer to which this chapter applies shall 25 adopt a procedure for reconsideration of a rate or premium charged a physician or health care provider for professional liability 26 27 insurance coverage. The procedure must include: 28 (b) an opportunity for a hearing before officers or 29 (1)employees who have responsibility for determining rates and 30 premiums to be charged for professional liability insurance; and 31 32 (2) a requirement that the insurer reconsider the rate 33 or premium and provide the physician or health care provider a written explanation of the rate or premium being charged. 34 (V.T.I.C. Art. 5.15-1, Sec. 4B(a).) 35 36 Source Law 37 Sec. 4B. (a) Each insurer covered by this

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article shall adopt a procedure for reconsideration of

a rate or premium charged a physician or health care provider for professional liability insurance coverage. The procedure shall include an opportunity for a hearing before officers or employees who have responsibility for determining rates and premiums to be charged for professional liability insurance and a requirement that the insurer reconsider the rate or premium and provide the physician or health care provider a written explanation of the rate or premium being charged.

11 Revised Law

- Sec. 1901.102. APPEAL. A physician or health care provider that is not satisfied with a decision under procedures established under Section 1901.101 may appeal to the commissioner for:
- 15 (1) a review of the rate or premium; and
- 16 (2) a determination of whether the rate or premium 17 being charged complies with criteria under Sections 18 1901.051-1901.054 and 1901.057. (V.T.I.C. Art. 5.15-1, Sec.

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20 <u>Source Law</u>

(b) If a physician or health care provider is not satisfied with a decision under procedures established under Subsection (a) of this section, the physician or health care provider may appeal to the State Board of Insurance for a review of the rate or premium and a determination if the rate or premium being charged complies with criteria under Section 3 of this article.

[Sections 1901.103-1901.150 reserved for expansion]

SUBCHAPTER D. BEST PRACTICES FOR NURSING HOMES

31 Revised Law

- Sec. 1901.151. BEST PRACTICES. (a) The commissioner shall adopt best practices for risk management and loss control that may be used by for-profit and not-for-profit nursing homes.
- 35 (b) In developing or amending the best practices, the 36 commissioner shall consult with the Health and Human Services 37 Commission and a task force appointed by the commissioner.
 - (c) The task force must be composed of representatives of:
- 39 (1) insurers that write professional liability
 40 insurance for nursing homes;
- 41 (2) the Texas Medical Liability Insurance 42 Underwriting Association;

1	(3) nursing homes; and
2	(4) consumers. (V.T.I.C. Art. 5.15-4, Secs. (a),
3	(c).)
4	Source Law
5 6 7 8	Art. 5.15-4. (a) The commissioner shall adopt best practices for risk management and loss control that may be used by for-profit and not-for-profit nursing homes.
9 10 11 12 13 14 15 16 17 18 19	<pre>(c) In developing or amending best practices for for-profit and not-for-profit nursing homes, the commissioner shall consult with the Health and Human Services Commission and a task force appointed by the commissioner. The task force must be composed of representatives of:</pre>
21	Revised Law
22	Sec. 1901.152. CONSIDERATION OF BEST PRACTICES IN SETTING
23	RATES. In setting rates for professional liability insurance
24	applicable to a for-profit or not-for-profit nursing home, an
25	insurer or the Texas Medical Liability Insurance Underwriting
26	Association may consider whether the nursing home adopts and
27	implements the best practices adopted under this subchapter.
28	(V.T.I.C. Art. 5.15-4, Sec. (b).)
29	Source Law
30 31 32 33 34 35	(b) In determining rates for professional liability insurance applicable to a for-profit or not-for-profit nursing home, an insurance company or the Texas Medical Liability Insurance Underwriting Association may consider whether the nursing home adopts and implements the best practices adopted by the commissioner under Subsection (a) of this article.
37	Revised Law
38	Sec. 1901.153. STANDARD OF CARE FOR CIVIL ACTIONS NOT
39	ESTABLISHED. The best practices for risk management and loss
40	control adopted under this subchapter do not establish standards of
41	care for nursing homes applicable in a civil action against a
12	nursing home. (V.T.I.C. Art. 5.15-4, Sec. (d).)
43	Source Law
14	(d) The best practices for risk management and

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1 2 3	loss control adopted under this article do not establish standards of care for nursing homes applicable in a civil action against a nursing home.				
4	[Sections 1901.154-1901.200 reserved for expansion]				
5	SUBCHAPTER E. POLICY FORMS				
6	Revised Law				
7	Sec. 1901.201. STANDARDIZED POLICY FORMS; APPROVAL OF OTHER				
8	FORMS. (a) The commissioner shall prescribe standardized policy				
9	forms for occurrence, claims-made, and claims-paid professional				
10	liability insurance policies for physicians and health care				
11	providers.				
12	(b) An insurer may not use a form other than a standardized				
13	policy form in writing professional liability insurance for				
14	physicians and health care providers unless the form has been				
15	approved by the commissioner.				
16	(c) An insurer writing professional liability insurance for				
17	physicians and health care providers may use an endorsement if the				
18	endorsement has been filed with and approved by the commissioner.				
19	(V.T.I.C. Art. 5.15-1, Sec. 4(c).)				
20	Source Law				
21 22 23 24 25 26 27 28 29 30 31 32	(c) The State Board of Insurance shall prescribe standardized policy forms for occurrence, claims-made and claims-paid policies of professional liability insurance covering health care providers and physicians, and no insurer may use any other forms in writing professional liability insurance for health care providers and physicians without the prior approval of the State Board of Insurance. However, an insurer writing professional liability insurance for health care providers and physicians may use any form of endorsement if the endorsement is first submitted to and approved by the board.				
33	[Sections 1901.202-1901.250 reserved for expansion]				
34	SUBCHAPTER F. COVERAGE				
35	Revised Law				
36	Sec. 1901.251. PREMIUM BASIS. An insurer may not write a				
37	professional liability insurance policy under this chapter on less				
38	than an annual premium basis. (V.T.I.C. Art. 5.15-1, Sec. 6.)				
39	Source Law				
40 41 42	Sec. 6. Policies of professional liability insurance under this article shall be written on not less than an annual premium basis.				

1 Revised Law

- 2 Sec. 1901.252. COVERAGE FOR EXEMPLARY DAMAGES. (a) Except
- 3 as provided by Subsection (b), a medical professional liability
- 4 insurance policy issued to or renewed for a physician or health care
- 5 provider in this state may not include coverage for exemplary
- 6 damages that may be assessed against the physician or health care
- 7 provider.

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- 8 (b) The commissioner may approve an endorsement form that
- 9 provides for coverage for exemplary damages for use on a medical
- 10 professional liability insurance policy issued to:
- 11 (1) a hospital; or
- 12 (2) a for-profit or not-for-profit nursing home or
- assisted living facility. (V.T.I.C. Art. 5.15-1, Sec. 8.)

14 Source Law

Sec. 8. No policy of medical professional liability insurance issued to or renewed for a health care provider or physician in this state may include coverage for exemplary damages that may be assessed against the health care provider or physician; provided, however, that the commissioner may approve an endorsement form that provides for coverage for exemplary damages to be used on a policy of medical professional liability insurance issued to a hospital, as the term "hospital" is defined in this article, or to a for-profit or not-for-profit nursing home or assisted living facility.

27 <u>Revised Law</u>

- Sec. 1901.253. NOTICE OF PREMIUM INCREASE, CANCELLATION, OR
- 29 NONRENEWAL. (a) An insurer that issues a professional liability
- 30 insurance policy for a physician or health care provider must
- 31 provide to the insured written notice of at least 90 days if the
- 32 insurer intends to:
- 33 (1) increase the premiums on the policy; or
- 34 (2) cancel or not renew the policy for a reason other
- 35 than for nonpayment of premiums or because the insured is no longer
- 36 licensed.
- 37 (b) If the insurer intends to increase the premiums, the
- insurer shall state in the notice the amount of the increase.
- 39 (c) If the insurer intends to cancel or not renew the

Τ.	portey, the insurer sharr state in the notice the reason for
2	cancellation or nonrenewal.
3	(d) An insurer may provide notice of cancellation under this
4	section only within the first 90 days from the effective date of the
5	policy. (V.T.I.C. Art. 5.15-1, Sec. 7.)
6	Source Law
7 8 9 10 12 13 14 15 16 17 18 19 20	Sec. 7. An insurer who issues a policy of professional liability insurance covered by this article shall give at least 90 days' written notice to an insured if premiums on the insurance are to be increased or the policy is to be cancelled or is not to be renewed other than for nonpayment of premiums or because the insured is no longer licensed. If the premiums are to be increased, the notice shall state the amount of the increase, and if the policy is to be cancelled or is not to be renewed, the insurer shall state in the notice the reason for cancellation or nonrenewal. Notice of cancellation under this section may only be given within the first 90 days from the effective date of the policy.
21	CHAPTER 1902. CERTAIN LIABILITY COVERAGE FOR
22	PHYSICIANS AND HEALTH CARE PROVIDERS
23	Sec. 1902.001. DEFINITIONS
24	Sec. 1902.002. COVERAGE FOR PHYSICIANS OR HEALTH CARE
25	PROVIDERS UNDER VENDOR ENDORSEMENTS
26	OR CERTAIN POLICIES
27	Sec. 1902.003. EXCLUSIONS AND LIMITATIONS ON COVERAGE
28	UNDER VENDOR ENDORSEMENTS PROHIBITED 867
29	CHAPTER 1902. CERTAIN LIABILITY COVERAGE FOR
30	PHYSICIANS AND HEALTH CARE PROVIDERS
31	Revised Law
32	Sec. 1902.001. DEFINITIONS. In this chapter:
33	(1) "Health care provider" has the meaning assigned
34	by Section 1901.001.
35	(2) "Manufacturer" has the meaning assigned by Section
36	82.001, Civil Practice and Remedies Code.
37	(3) "Physician" has the meaning assigned by Section
88	1901.001. (New; V.T.I.C. Art. 5.15-1, Sec. 11 (part).)
39	Source Law
10 11	Sec. 11. [An insurer may not exclude or otherwise limit coverage under a vendor's

1 2 3	endorsement issued to a manufacturer,] as that term is defined by Section 82.001, Civil Practice and Remedies Code
4	Revisor's Note
5	Section 2, V.T.I.C. Article 5.15-1, provides
6	definitions applicable to terms used in Section 11 of
7	that article, revised as this chapter. The revised law
8	adds a cross-reference to the applicable definitions
9	as revised in Section 1901.001 of this code.
LO	Revised Law
L1	Sec. 1902.002. COVERAGE FOR PHYSICIANS OR HEALTH CARE
L2	PROVIDERS UNDER VENDOR ENDORSEMENTS OR CERTAIN POLICIES. A
L3	physician or health care provider is considered a vendor for
L4	purposes of coverage under a vendor's endorsement or a
L5	manufacturer's general liability or products liability policy.
L6	(V.T.I.C. Art. 5.15-1, Sec. 11 (part).)
L7	Source Law
L8 L9 20 21 22	Sec. 11 A physician or health care provider shall be considered a vendor for purposes of coverage under a vendor's endorsement or a manufacturer's general liability or products liability policy.
23	Revised Law
24	Sec. 1902.003. EXCLUSIONS AND LIMITATIONS ON COVERAGE UNDER
25	VENDOR ENDORSEMENTS PROHIBITED. An insurer may not exclude or
26	otherwise limit coverage for physicians or health care providers
27	under a vendor's endorsement issued to a manufacturer. (V.T.I.C.
28	Art. 5.15-1, Sec. 11 (part).)
29	Source Law
30 31 32 33	Sec. 11. An insurer may not exclude or otherwise limit coverage for physicians or health care providers under a vendor's endorsement issued to a manufacturer,
34	CHAPTER 1903. LOSS CONTROL INFORMATION AND SERVICES
35	SUBCHAPTER A. LOSS CONTROL SERVICES FOR
36	PROFESSIONAL LIABILITY INSURANCE FOR HOSPITALS
37	Sec. 1903.001. DEFINITION
38	Sec. 1903.002. INAPPLICABILITY OF SUBCHAPTER
39	Sec. 1903.003. LOSS CONTROL SERVICES REQUIRED870

1	Sec. 1903.004. SANCTIONS
2	Sec. 1903.005. RULES
3	[Sections 1903.006-1903.050 reserved for expansion]
4	SUBCHAPTER B. LOSS CONTROL INFORMATION FOR GENERAL AND CERTAIN
5	PROFESSIONAL LIABILITY INSURANCE
6	Sec. 1903.051. LOSS CONTROL INFORMATION REQUIRED873
7	Sec. 1903.052. SANCTIONS
8	Sec. 1903.053. RULES
9	[Sections 1903.054-1903.100 reserved for expansion]
10	SUBCHAPTER C. CIVIL PROCEEDINGS
11	Sec. 1903.101. IMMUNITY FROM LIABILITY
12	Sec. 1903.102. LOSS CONTROL INFORMATION NOT
13	DISCOVERABLE OR ADMISSIBLE876
14	CHAPTER 1903. LOSS CONTROL INFORMATION AND SERVICES
15	SUBCHAPTER A. LOSS CONTROL SERVICES FOR
16	PROFESSIONAL LIABILITY INSURANCE FOR HOSPITALS
17	Revised Law
18	Sec. 1903.001. DEFINITION. In this subchapter, "hospital"
19	means a public or private institution licensed under Chapter 241 or
20	577, Health and Safety Code. (V.T.I.C. Art. 5.15-2, Sec. (e).)
21	Source Law
22 23 24 25 26	(e) In this article, "hospital" means a licensed public or private institution as defined in Chapter 241, Health and Safety Code, or in Section 88, Chapter 243, Acts of the 55th Legislature, Regular Session, 1957 (Article 5547-88, Vernon's Texas Civil Statutes).
27	Revisor's Note
28	Section (e), V.T.I.C. Article 5.15-2, refers to
29	Section 88, Chapter 243, Acts of the 55th Legislature,
30	Regular Session, 1957 (Article 5547-88, Vernon's Texas
31	Civil Statutes). Article 5547-88 was codified in 1991
32	in Chapter 577, Health and Safety Code, which governs
33	the licensing of certain mental health facilities.
34	The revised law is drafted accordingly.
35	Revised Law
36	Sec. 1903.002. INAPPLICABILITY OF SUBCHAPTER. This

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- 1 subchapter and Subchapter C do not apply to insurance policies that
- 2 provide excess coverage issued by the Texas Medical Liability
- 3 Insurance Underwriting Association under Chapter 2203, or to those
- 4 policies if the policies are serviced by an insurer acting as a
- 5 servicing carrier under an agreement entered into between the
- 6 association and the insurer and approved by the commissioner.
- 7 (V.T.I.C. Art. 5.15-2, Sec. (f).)

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8 <u>Source Law</u>

(f) This article does not apply to insurance policies that provide excess coverage issued by the Texas Medical Liability Insurance Underwriting Association under Article 21.49-3 of this code, and does not apply to those policies if serviced by an insurer acting as a servicing carrier under an agreement entered into between the Texas Medical Liability Insurance Underwriting Association and the insurer and approved by the State Board of Insurance.

Revisor's Note

- (1)(f), V.T.I.C. Article Section 5.15-2, refers to insurance policies that provide excess coverage issued by the Texas Medical Liability Insurance Underwriting Association under V.T.I.C. The relevant provisions of Article Article 21.49-3. 21.49-3 are revised in Chapter 2203 of this code. That chapter also contains provisions derived from V.T.I.C. Article 21.49-3d, which relates to the issuance of bonds on behalf of the association to provide certain professional liability insurance. The revised law refers to Chapter 2203 in its entirety because the provisions of that chapter that are derived from Article 21.49-3d do not relate to the issuance of policies by the association.
- (2) Section (f), V.T.I.C. Article 5.15-2, refers to the State Board of Insurance. Chapter 685, Acts of the 73rd Legislature, Regular Session, 1993, abolished the board and transferred its functions to the commissioner of insurance and the Texas Department of Insurance. Throughout this chapter, references to

1	the board have been changed appropriately.			
2	Revised Law			
3	Sec. 1903.003. LOSS CONTROL SERVICES REQUIRED. (a) Befor			
4	writing professional liability insurance for a hospital in this			
5	state, an insurer must maintain or provide loss control facilities			
6	that:			
7	(1) provide loss control services reasonably			
8	commensurate with the risks, exposures, and experience of the			
9	insured's business;			
10	(2) are adequate to provide loss control services			
11	required by the nature of the policyholder's operations; and			
12	(3) include surveys, recommendations, training			
13	programs, consultations, and analyses of accident causes.			
14	(b) To provide the facilities required by this section, the			
15	insurer may:			
16	(1) employ qualified personnel;			
17	(2) retain qualified independent contractors;			
18	(3) contract with the policyholder to provide			
19	qualified loss control personnel and services; or			
20	(4) use a combination of methods described by this			
21	subsection.			
22	(c) Independent contractors and other personnel described			
23	by Subsection (b) must have the qualifications of a field safety			
24	representative. A field safety representative must be an			
25	individual who:			
26	(1) holds a:			
27	(A) bachelor's degree in science or engineering;			
28	(B) bachelor of arts degree in nursing;			
29	(C) bachelor of science degree in nursing,			
30	pharmacy, or physical therapy; or			
31	(D) master's degree in hospital administration;			
32	(2) is a licensed engineer;			
33	(3) is a certified safety professional;			
34	(4) is a certified industrial hygienist;			

- 1 (5) has at least 10 years' experience in occupational
- 2 safety and health; or
- 3 (6) has completed a course of training in loss control
- 4 services approved by the department. (V.T.I.C. Art. 5.15-2, Secs.
- 5 (a), (b).)

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6 Source Law

Art. 5.15-2. (a) Any insurer desiring to write professional liability insurance for hospitals in maintain provide shall loss Οľ writing facilities as a prerequisite for such insurance. Such facilities shall be adequate to furnish loss control services required by the nature its policyholder's operations and shall include recommendations, training programs, consultations, and analyses of accident causes. field safety representative shall be either a college graduate who shall have a bachelor's degree in science or engineering, a bachelor of arts degree in nursing, a bachelor of science degree in nursing, pharmacy, or physical therapy, or a master's degree in hospital administration, or shall be a registered professional engineer, a certified safety professional, a certified industrial hygienist, an individual with 10 years' experience in occupational safety and health, or an individual who shall have completed a course of training in loss control services approved by the State Board of Insurance.

(b) The insurer shall render loss services to its policyholders reasonably commensurate with the risks and exposures and experience of the To provide such facilities, insured's business. employ qualified personnel, insurer may retain qualified independent contractors, contract with the policyholder to provide qualified loss control personnel and services, or use a combination of the methods enumerated in this subsection. Such personnel shall have the qualification required for field safety representatives as provided in Subsection (a) of this article.

Revisor's Note

Section (a), V.T.I.C. Article 5.15-2, refers to a "registered professional engineer." The revised law substitutes "engineer" for "professional engineer" because "engineer" is the term used by Chapter 1001, Occupations Code, which regulates engineers. The revised law also substitutes "licensed" for "registered" because that chapter requires that a person hold a license to engage in the practice of engineering.

Revised Law

Sec. 1903.004. SANCTIONS. (a) If there is evidence that reasonable loss control services are not being maintained or provided by an insurer as required by this subchapter or are not being used by the insurer in a reasonable manner to prevent injury to patients of the insurer's policyholders, the commissioner shall order a hearing to determine whether the insurer is not in compliance with this subchapter.

(b) If it is determined that the insurer is not in compliance, the commissioner may impose any sanction authorized by Chapter 82. (V.T.I.C. Art. 5.15-2, Sec. (c).)

Source Law

(c) If the Commissioner of Insurance shall determine that reasonable loss control services are not being maintained or provided by the insurer or are not being used by the insurer in a reasonable manner to prevent injury to patients of its policyholders, the fact shall be reported to the State Board of Insurance, and the board shall order a hearing to determine if the insurer is not in compliance with this article. If it is determined that the insurer is not in compliance, the board may impose any sanctions authorized by Section 7, Article 1.10, of this code.

Revisor's Note

- (c), V.T.I.C. (1)Section Article 5.15-2, refers to the "Commissioner of Insurance." The "commissioner" revised law substitutes for "Commissioner of Insurance" because Section 31.001 of code defines "commissioner" to this mean commissioner of insurance for purposes of this code.
- (2) Section (c), V.T.I.C. Article 5.15-2, requires the commissioner of insurance to report certain facts to the State Board of Insurance. The revised law omits the requirement as unnecessary because, as explained in Revisor's Note (2) to Section 1903.002, the State Board of Insurance was abolished and its functions were transferred to the commissioner and Texas Department of Insurance. In this context, the function of receiving the report has been

transferred to the commissioner, and it is unnecessary to require the commissioner to both make and receive the report.

4 Revised Law

Sec. 1903.005. RULES. The commissioner may adopt reasonable rules for the enforcement of this subchapter after holding a public hearing on the proposed rules. (V.T.I.C. Art. 5.15-2, Sec. (d).)

9 Source Law

10 (d) The State Board of Insurance may promulgate 11 reasonable rules and regulations for the enforcement 12 of this article after holding a public hearing on the 13 proposed rules and regulations.

14 <u>Revisor's Note</u>

15 Section (d), V.T.I.C. Article 5.15-2, refers to regulations." "rules The reference 16 and t.o "regulations" is omitted from the revised law because 17 Section 311.005(5), Government Code 18 19 Construction Act), a rule is defined to include a 20 regulation. That definition applies to the revised law. 21

[Sections 1903.006-1903.050 reserved for expansion]

SUBCHAPTER B. LOSS CONTROL INFORMATION FOR GENERAL AND CERTAIN

PROFESSIONAL LIABILITY INSURANCE

25 Revised Law

Sec. 1903.051. LOSS CONTROL INFORMATION REQUIRED. 26 Before writing professional liability insurance, including medical 27 liability insurance, for 28 professional insureds other 29 hospitals or general liability insurance in this state, an insurer insurer's policyholders 30 provide to the loss 31 information reasonably commensurate with the risks, exposures, and experience of the insured's business. 32

- (b) To provide the information described by Subsection (a) or services, the insurer may:
- 35 (1) employ qualified personnel;

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- (2) retain qualified independent contractors;
- 2 (3) contract with the policyholder to provide
- 3 qualified loss control personnel and services; or
- 4 (4) use a combination of methods described by this
- 5 subsection. (V.T.I.C. Art. 5.15-3, Secs. (a), (b).)

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Art. 5.15-3. (a) Any insurer desiring to write professional liability insurance for insureds other than hospitals, general liability insurance, or medical professional liability insurance for insureds other than hospitals in this state must provide loss control information as a prerequisite for writing that insurance.

The (b) insurer shall provide loss information its policyholders reasonably to commensurate with the risks and exposures and experience of the insured's business. To provide this information or services, the insurer may employ qualified personnel, retain qualified independent contractors, contract with the policyholder to provide qualified accident prevention personnel and services, or use a combination of the methods provided by this article.

Revisor's Note

Section (b), V.T.I.C. Article 5.15-3, refers to "qualified accident prevention personnel and Section (b), V.T.I.C. Article 5.15-2, services." revised in this chapter in Section 1903.003, refers to "qualified loss control personnel and services." The revised law substitutes "qualified loss control personnel and services" for "qualified accident prevention personnel and services" for consistency of terminology throughout this chapter and "qualified loss control personnel and services" more accurately describes the type of personnel and services provided with respect to liability insurance.

Revised Law

Sec. 1903.052. SANCTIONS. (a) If there is evidence that reasonable loss control information is not being provided by an insurer as required by this subchapter or is not being used by the insurer in a reasonable manner to reduce losses, the commissioner shall order a hearing to determine whether the insurer is not in

1 compliance with this subchapter.

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- 2 (b) If it is determined that the insurer is not in
- 3 compliance, the commissioner may impose any sanction authorized by
- 4 Chapter 82. (V.T.I.C. Art. 5.15-3, Sec. (c).)

5 Source Law

(c) If there is evidence that reasonable loss control information is not being provided by the insurer or is not being used by the insurer in a reasonable manner to reduce losses, the State Board of Insurance shall order a hearing to determine if the insurer is not in compliance with this article. If it is determined that the insurer is not in compliance, the board may impose any of the sanctions authorized by Section 7, Article 1.10, of this code.

<u>Revised Law</u>

Sec. 1903.053. RULES. After opportunity for a hearing, the commissioner may adopt reasonable rules for the enforcement of this subchapter. (V.T.I.C. Art. 5.15-3, Sec. (d).)

19 Source Law

20 (d) After opportunity for a hearing, the State 21 Board of Insurance may promulgate reasonable rules and 22 regulations for the enforcement of this article.

Revisor's Note

Section (d), V.T.I.C. Article 5.15-3, refers to "rules and regulations." The reference to "regulations" is omitted from the revised law for the reason stated in the revisor's note to Section 1903.005.

[Sections 1903.054-1903.100 reserved for expansion]

SUBCHAPTER C. CIVIL PROCEEDINGS

31 Revised Law

Sec. 1903.101. IMMUNITY FROM LIABILITY. (a) An insurer or an agent or employee of the insurer is not liable, and a cause of action does not arise against the insurer, agent, or employee, for an accident based on an allegation that the accident was caused or could have been prevented by a program, information, inspection, or other activity or service undertaken by the insurer to prevent accidents or to control losses, as applicable, in connection with the operations of the insured.

The immunity from liability provided by this section 1 (b) 2 does not affect the liability of an insurer as otherwise provided in 3 an insurance policy. (V.T.I.C. Art. 5.15-2, Sec. (g); Art. 5.15-3, Sec. (e).) 4 5 Source Law [Art. 5.15-2] 6 (g) An insurer, its agents, servants, or employees are not liable for and no cause of action arises with respect to any accident based on the 7 8 9 allegation that the accident was caused or could have 10 been prevented by a program, inspection, or other 11 activity or service undertaken by the insurer for the prevention of accidents in connection with operations 12 13 14 of its insured. However, this immunity does not affect the liability of an insurer as otherwise provided in a 15 16 policy of insurance. [Art. 5.15-3] 17 (e) An 18 insurer, its agents, servants, employees are not liable and no cause of action arises 19 with respect to any accident based on the allegation that the accident was caused or could have been prevented by a program, information, inspection, or 20 21 22 other activity or service undertaken by the insurer 23 24 for the prevention of accidents or control of losses in 25 connection with operations of its insured. However, 26 this immunity does not affect the liability of an insurer otherwise provided by a policy of insurance. 27 28 Revisor's Note 29 Section (g), V.T.I.C. Article 5.15-2, and Section (e), V.T.I.C. Article 5.15-3, refer to an insurer's 30 "agents, servants, or employees." The revised law 31 omits "servants" because the term is included within 32 the meaning of "agents . . . or employees." 33 34 Revised Law 35 Sec. 1903.102. LOSS CONTROL INFORMATION NOT DISCOVERABLE OR 36 ADMISSIBLE. Loss control information provided by an insurer to an 37 insured is not discoverable or admissible as evidence in a civil proceeding. (V.T.I.C. Art. 5.15-2, Sec. (h); Art. 5.15-3, Sec. 38 (f).) 39 40 Source Law [Art. 5.15-2] 41 42 (h) Loss control information provided by 43 to an insured is not discoverable

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insurer

[Art. 5.15-3]

(f) Any loss control information provided by an

admissible in any civil proceeding as evidence.

or

2	insurer to an insured is not subject to discovery or admissible in any civil proceeding as evidence.
3	[Chapters 1904-1950 reserved for expansion]
4	SUBTITLE C. AUTOMOBILE INSURANCE
5	CHAPTER 1951. GENERAL PROVISIONS: AUTOMOBILE INSURANCE
6	Sec. 1951.001. RATES FOR AUTOMOBILE INSURANCE877
7	Sec. 1951.002. RULES
8	Sec. 1951.003. FORMER MILITARY VEHICLES
9	Sec. 1951.004. CRIMINAL PENALTY
LO	CHAPTER 1951. GENERAL PROVISIONS: AUTOMOBILE INSURANCE
L1	Revised Law
L2	Sec. 1951.001. RATES FOR AUTOMOBILE INSURANCE. Rates for
L3	personal and commercial automobile insurance in this state are
L 4	determined as provided by Chapter 2251 and Article 5.13-2.
L5	(V.T.I.C. Art. 5.11, Sec. (c) (part).)
L6	Source Law
L7 L8 L9 20	(c) On and after December 1, 2004, rates for personal automobile insurance and commercial automobile insurance in this state are determined as provided by Article 5.13-2 of this code.
21	Revisor's Note
22	Section (c), V.T.I.C. Article 5.11, provides that
23	rates for commercial and personal automobile insurance
24	are determined as provided by V.T.I.C. Article 5.13-2.
25	The relevant provisions of that article that are
26	revised are contained in Chapter 2251 of this code.
27	Although that chapter contains other provisions that
28	are derived from V.T.I.C. Article 5.13-2C, the revised
29	law appropriately refers to the chapter in its
30	entirety because the provisions that are derived from
31	Article 5.13-2C do not apply by their own terms to
32	automobile insurance.
33	Revised Law
34	Sec. 1951.002. RULES. The commissioner may adopt and
35	enforce reasonable rules necessary to carry out the provisions of

this subtitle. (V.T.I.C. Art. 5.10.)

Source Law

Art. 5.10. The Board is hereby empowered to make and enforce all such reasonable rules and regulations not inconsistent with the provisions of this subchapter as are necessary to carry out its provisions.

Revisor's Note

- V.T.I.C. Article 5.10 refers to the "Board," (1)meaning the Board of Insurance Commissioners. Under Chapter 499, Acts of the 55th Legislature, Regular Session, 1957, administration of the insurance laws of this state was reorganized and the powers and duties of the Board of Insurance Commissioners were transferred to the State Board of Insurance. Chapter 685, Acts of the 73rd Legislature, Regular Session, 1993, abolished the State Board of Insurance and transferred its functions to the commissioner of insurance and the Texas Department of Insurance. For that reason, the revised law substitutes a reference to the commissioner for the reference to the Board οf Insurance Commissioners.
- (2) V.T.I.C. Article 5.10 authorizes the Board of Insurance Commissioners, meaning the commissioner of insurance for the reasons stated in Revisor's Note (1) to this section, to adopt "rules and regulations inconsistent with the provisions subchapter." The revised law omits as unnecessary the reference to "regulations" because a rule is defined under Section 311.005(5), Government Code (Code Construction Act), to include a regulation, and that definition applies to the revised law. In addition, revised law omits the reference inconsistent with the provisions of this subchapter" as unnecessary because the commissioner of insurance does not have authority to adopt rules that are inconsistent with a statute.

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- Sec. 1951.003. FORMER MILITARY VEHICLES. (a) In this section, "former military vehicle" has the meaning assigned by Section 504.502, Transportation Code.
- 5 (b) A rating plan that includes a classification applicable 6 to antique, privately owned passenger vehicles that are maintained 7 primarily for use in exhibitions, club activities, parades, or 8 other functions of public interest and that may be used 9 occasionally for other purposes must include in that classification 10 former military vehicles maintained for those uses. (V.T.I.C. 11 Art. 5.01-3.)

12 <u>Source Law</u>

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Art. 5.01-3. (a) A rating plan that includes a classification applicable to antique, private passenger vehicles maintained primarily for use in exhibitions, club activities, parades, and other functions of public interest and occasionally used for other purposes must include in the classification former military vehicles maintained for those uses.

former military vehicles maintained for those uses.

(b) In this article, "former military vehicle" has the meaning assigned by Section 502.275,

Transportation Code.

Revisor's Note

Section (b), V.T.I.C. Article 5.01-3, provides that "'former military vehicle' has the meaning assigned by Section 502.275, Transportation Code." Section 502.275, Transportation Code, was repealed by Chapter 1320, Acts of the 78th Legislature, Regular Session, 2003, which enacted Chapter 504, Transportation Code, relating to specialty license plates. "Former military vehicle" is now defined by Section 504.502, Transportation Code, and the revised law is drafted accordingly.

34 Revised Law

- Sec. 1951.004. CRIMINAL PENALTY. (a) An insurer, or an officer or representative of an insurer, commits an offense if the insurer, officer, or representative violates:
- 38 (1) Section 1951.001, 1951.002, 1952.051, 1952.052,

- 1 1952.053, 1952.054, or 1952.055;
- 2 (2) Subchapter B, Chapter 1806;
- 3 (3) Chapter 254; or
- 4 (4) Article 5.01, 5.02, 5.03, 5.05, 5.06, 5.10, or
- 5 5.11.

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- 6 (b) An offense under this section is a misdemeanor
- 7 punishable by a fine of not less than \$100 or more than \$500.
- 8 (V.T.I.C. Art. 5.12-1 (part).)

9 <u>Source Law</u>

Art. 5.12-1. Any insurer or officer or representative thereof which shall violate any provision of this Act... shall be deemed guilty of a misdemeanor and, upon conviction thereof, shall be punished by a fine of not less than One Hundred (\$100.00) Dollars nor more than Five Hundred (\$500.00) Dollars for each such offense.

Revisor's Note

(1)V.T.I.C. Article 5.12-1 refers to certain sanctions imposed on an insurer or an officer or representative of an insurer for a violation of "this Act." Article 5.12-1 was transferred from Article 571a, Vernon's Annotated Penal Code, by authority of Section 5, Chapter 399, Acts of the 63rd Legislature, Regular Session, 1973, enacting the current Texas Former Article 571a was originally Penal Code. enacted as Section 12, Chapter 253, Acts of the 40th Legislature, Regular Session, 1927. Sections 1-11 of that chapter were originally published as Article 4682b, Vernon's Texas Civil Statutes. Article 4682b was codified as Subchapter A, V.T.I.C. Chapter 5, which consisted of V.T.I.C. Articles 5.01, 5.02, 5.03, 5.04, 5.05, 5.06, 5.07, 5.08, 5.09, 5.10, 5.11, and 5.12, by Chapter 491, Acts of the 52nd Legislature, Regular Session, 1951. The revised law omits the references to Article 5.04 and to the portion of Article 5.12 that is revised in Chapter 251 of this code, because those laws relate to powers and duties of

the commissioner of insurance and do not contain provisions that an insurer or an officer or representative of an insurer could violate.

V.T.I.C. Article 5.12-1 in part provides that an insurer or an officer or representative of an insurer is subject to revocation of the insurer's, officer's, or representative's license by the Board of Insurance Commissioners for a violation of "this Act," meaning V.T.I.C. Articles 5.01, 5.02, 5.03, 5.04, 5.05, 5.06, 5.07, 5.08, 5.09, 5.10, 5.11, and 5.12, for the reason stated in Revisor's Note (1) to this section. For the reasons stated in Revisor's Note (1) to Section 1951.002, the commissioner of insurance now has the authority to revoke a license under Article 5.12-1 that was formerly granted to the board. revised law omits the referenced provision of Article 5.12-1 as unnecessary. Section 82.051 of this code authorizes the commissioner to revoke a certificate of authority, which includes a license, after notice and an opportunity for hearing if the holder of the authorization violates this code. That revocation officer, procedure applies to insurer, an or representative that violates one of the listed provisions without an additional statement to that effect. The omitted law reads:

Art. 5.12-1. [Any insurer or officer or representative thereof which shall violate any provision of this Act] shall be subject to a revocation of his or its license by the Board of Insurance Commissioners and in addition . . .

CHAPTER 1952. POLICY PROVISIONS AND FORMS FOR

AUTOMOBILE INSURANCE

34 SUBCHAPTER A. GENERAL PROVISIONS

[Sections 1952.002-1952.050 reserved for expansion]

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15	CHAPTER 1952. POLICY PROVISIONS AND FORMS FOR								
16	AUTOMOBILE INSURANCE								
17	SUBCHAPTER A. GENERAL PROVISIONS								
18	Revised Law								
19	Sec. 1952.001. APPLICABILITY OF CHAPTER. Except as								
20	provided by Section 1952.201, this chapter applies to an insurer								
21	writing automobile insurance in this state, including an insurance								
22	company, corporation, reciprocal or interinsurance exchange,								
23	mutual insurance company, association, Lloyd's plan, or other								
24	insurer. (V.T.I.C. Art. 5.01, Sec. (a) (part).)								
25	Source Law								
26 27 28 29 30	Art. 5.01. (a) Every insurance company, corporation, interinsurance exchange, mutual, reciprocal, association, Lloyd's or other insurer, hereinafter called insurer, writing any form of motor vehicle insurance in this State,								
31	Revisor's Note								
32	(1) Section (a), V.T.I.C. Article 5.01, in part								
33	states the general applicability of Subchapter A,								
34	V.T.I.C. Chapter 5. The provisions revised in this								
35	chapter are derived from that subchapter. V.T.I.C.								
36	Article 5.01C, revised in this chapter as Subchapter								

- E, is included in Subchapter A, Chapter 5. Section 1(1), Article 5.01C, revised in this chapter as Section 1952.201, states the applicability of Article 5.01C, which is different from the general applicability of Subchapter A, Chapter 5. For that reason, the revised law adds a cross-reference to Section 1952.201 for the convenience of the reader.
 - (2) Section (a), V.T.I.C. Article 5.01, refers to an "interinsurance exchange," a "mutual," a "reciprocal," and a "Lloyd's." For consistent use of terminology throughout this code, the revised law substitutes for the quoted language references to a "reciprocal or interinsurance exchange," a "mutual insurance company," and a "Lloyd's plan." Similar changes have been made throughout this chapter.
 - (3) Section (a), V.T.I.C. Article 5.01, refers to "motor vehicle insurance." Throughout this chapter, the revised law substitutes "automobile insurance" for "motor vehicle insurance" for consistency of terminology in this code. "Automobile insurance" is the term more commonly used to describe the kind of insurance that provides coverage for motor vehicles.

[Sections 1952.002-1952.050 reserved for expansion] SUBCHAPTER B. POLICY FORMS AND PROVISIONS IN GENERAL

Revised Law

Sec. 1952.051. POLICY FORMS FOR AUTOMOBILE INSURANCE.

Notwithstanding Subsections (1)-(4) and (7), Article 5.06, policy
forms and endorsements for automobile insurance in this state are
regulated under Chapter 2301 and Article 5.13-2. (V.T.I.C. Art.

31 5.06, Sec. (12)(a).)

32 Source Law

33 (12)(a) Notwithstanding Subsections (1)-(10) of 34 this article, policy forms and endorsements for 35 automobile insurance in this state are regulated under Article 5.13-2 of this code.

 <u>Revisor's Note</u>

Section (12)(a), V.T.I.C. Article 5.06, provides that "[n]otwithstanding Subsections (1)-(10) of this article," policy forms and endorsements for automobile insurance in this state are regulated under V.T.I.C. Article 5.13-2. The relevant provisions of Article 5.13-2 that are revised are contained in Chapter 2301. That chapter also contains provisions that are derived from V.T.I.C. Article 5.145. The revised law appropriately refers to Chapter 2301 in its entirety because the provisions of that chapter that are derived from Article 5.145 are necessary to construe the provisions of Article 5.13-2 that are revised in that chapter.

In addition, the revised law substitutes a reference to "Subsections (1)-(4) and (7), Article 5.06," for the reference to Subsections (1)-(10) of that article because Subsections (5) and (6), revised in this chapter as Section 1952.055, Subsection (8), revised in this chapter as Section 1952.053, and Subsections (9) and (10), revised in this chapter as Section 1952.054, apply on their own terms and do not conflict with Article 5.13-2.

Revised Law

Sec. 1952.052. USE OF PREVIOUSLY APPROVED OR ADOPTED POLICY FORMS AUTHORIZED. An insurer may continue to use a policy form or endorsement approved or adopted by the commissioner under Article 5.06 before June 11, 2003, on notification in writing to the commissioner that the insurer will continue to use the policy form or endorsement. (V.T.I.C. Art. 5.06, Sec. (12)(b).)

Source Law

(b) An insurer may continue to use the policy forms and endorsements promulgated, approved, or adopted by the commissioner under this article before the effective date of S.B. No. 14, Acts of the

78th Legislature, Regular Session, 2003, on notification in writing to the commissioner that the insurer will continue to use the policy forms and endorsements promulgated, approved, or adopted by the commissioner under this article.

Revisor's Note

- (1) Section (12)(b), V.T.I.C. Article 5.06, refers to forms and endorsements "promulgated, approved, or adopted" by the commissioner of insurance under V.T.I.C. Article 5.06, revised in this subchapter. The revised law omits "promulgated" as unnecessary. Article 5.06 authorizes the commissioner to adopt or approve forms and endorsements, but does not authorize the commissioner to promulgate forms or endorsements.
- (2) Section (12)(b), V.T.I.C. Article 5.06, refers to "the effective date of S.B. No. 14, [Chapter 206,] Acts of the 78th Legislature, Regular Session, 2003." That act had various effective dates. The revised law substitutes a reference to "June 11, 2003," for the quoted language because the general effective date of Chapter 206 was June 11, 2003. Furthermore, Article 5.06 was amended by Article 21 of Chapter 206, and the effective date of that article was also June 11, 2003.

Revised Law

Sec. 1952.053. WITHDRAWAL OF APPROVAL. The commissioner may, after notice and hearing, withdraw the commissioner's approval of a policy or endorsement form that was approved by the commissioner under Article 5.06. (V.T.I.C. Art. 5.06, Sec. (8).)

Source Law

(8) The Board may withdraw its approval of a policy or endorsement form at any time, after notice and hearing.

Revisor's Note

(1) Section (8), V.T.I.C. Article 5.06, refers to the "Board," meaning the Board of Insurance

Commissioners. Under Chapter 499, Acts of the 55th Legislature, Regular Session, 1957, administration of the insurance laws of this state was reorganized and the powers and duties of the Board of Insurance Commissioners were transferred to the State Board of Insurance. Chapter 685, Acts of the 73rd Legislature, Regular Session, 1993, abolished the State Board of Insurance and transferred its functions to the commissioner of insurance and the Texas Department of Insurance. Throughout this chapter, references to the "Board" have been changed appropriately.

Section (8), V.T.I.C. Article 5.06, provides that the "Board," meaning the commissioner of insurance for the reason stated in Revisor's Note (1) to this section, may withdraw the board's approval of a policy or endorsement form "at any time, after notice and hearing." The revised law omits "at any time" as unnecessary and misleading. A grant of power to the commissioner, absent any language limiting exercise of the power, implies that the commissioner may exercise the power at appropriate times. "At any time" is misleading because it contradicts the source law's requirement of notice and hearing, which acts as a restriction on the time at which the commissioner can act.

Revised Law

Sec. 1952.054. REQUIRED DISCLOSURES REGARDING SHORT-TERM POLICIES. (a) An insurance policy or other document evidencing proof of purchase of a personal automobile insurance policy written for a term of less than 30 days may not be used to obtain an original or renewal driver's license, an automobile registration or license plates, or a motor vehicle inspection certificate. An insurance policy or other document described by this subsection must contain the following statement:

1	TEXAS LAW	PROHIBITS	USE OF	THIS	DOCUM	IENT	ТО	OBTAIL	I A
2	MOTOR VEH	ICLE INSPE	CTION CE	ERTIF	CATE,	AN	ORI	GINAL	OF
3	RENEWAL	DRIVER'S	LICENS	SE,	OR	AN	AU	TOMOB	ILE
4	REGISTRAT	ION OR LICE	NSE PLAT	TES.					

5 (b) Before accepting any premium or fee for a personal 6 automobile insurance policy or binder for a term of less than 30 7 days, an agent or insurer must make the following written 8 disclosure to the applicant or insured:

9 TEXAS LAW PROHIBITS USE OF THIS POLICY OR BINDER TO
10 OBTAIN A MOTOR VEHICLE INSPECTION CERTIFICATE, AN
11 ORIGINAL OR RENEWAL DRIVER'S LICENSE, OR AN AUTOMOBILE
12 REGISTRATION OR LICENSE PLATES.

13 (V.T.I.C. Art. 5.06, Secs. (9) (part), (10) (part).)

14 <u>Source Law</u>

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- insurance policy An or other evidencing proof of purchase of a personal automobile insurance policy written for a term of less than 30 days . . . may not be used to obtain an original or renewal driver's license, an automobile registration or license plates, or a motor vehicle inspection certificate and must contain a statement as follows: "TEXAS LAW PROHIBITS USE OF THIS DOCUMENT TO OBTAIN A MOTOR VEHICLE INSPECTION CERTIFICATE, AN ORIGINAL OR DRIVER'S LICENSE, ΑN AUTOMOBILE RENEWAL OR REGISTRATION OR LICENSE PLATES."
- (10) Before accepting any premium or fee for a personal automobile insurance policy or binder for a term of less than 30 days . . . an agent or insurer must make the following written disclosure to the applicant or insured:
 "TEXAS LAW PROHIBITS USE OF THIS POLICY OR BINDER TO OBTAIN A MOTOR VEHICLE INSPECTION CERTIFICATE, AN ORIGINAL OR RENEWAL DRIVER'S LICENSE, OR AN AUTOMOBILE REGISTRATION OR LICENSE PLATES."

Revisor's Note

Section (11), V.T.I.C. Article 5.06, defines "time-based rating plan" and "mile-based rating plan" to have the meanings assigned by V.T.I.C. Article 5.01-4. Sections (9) and (10), Article 5.06, refer to policy premiums computed on a time-based rating plan and a mile-based rating plan. The revised law omits Section (11) and the provisions of Sections (9) and (10) relating to both types of rating plans because the

plans no longer exist. V.T.I.C. Article 5.01-4, which created time-based rating plans and mile-based rating plans and authorized the use of those rating plans, expired on September 1, 2005. The omitted law reads:

- (9) [An insurance policy or other document evidencing proof of purchase of a personal automobile insurance policy written for a term of less than 30 days] if the policy premium is computed using a time-based rating plan, or written for less than 1,000 miles if the policy premium is computed using a mile-based rating plan,
- (10)[Before accepting any premium or fee for a personal automobile insurance policy or binder for a term of less than 30 days] if the policy premium is computed using a time-based rating plan, or written for less than 1,000 miles if the policy premium is computed using a mile-based rating plan, .

this article, (11)Ιn the terms "time-based rating plan" and "mile-based rating plan" have the meanings assigned by

Article 5.01-4 of this code.

26 Revised Law

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CERTIFICATE OF INSURANCE AS SUBSTITUTE FOR Sec. 1952.055. INSURANCE POLICY. (a) An insurer that complies with applicable requirements may issue and deliver a certificate of insurance as a substitute for issuing and delivering an insurance policy adopted or approved by the commissioner. The certificate must:

- be in the form prescribed by the commissioner; and
- refer to and identify the policy form for which the 33 (2) 34 certificate is substituted.
 - (b) A certificate under this section represents insurance policy and, when issued, is evidence that the certificate insured under the identified policy form. holder is The certificate is subject to the same limitations, conditions, coverages, selection of options, and other provisions provided in the policy, and the certificate must show and adequately reference that policy information. The certificate or subsequent attachments to the certificate must refer to all endorsements to the policy.
 - A certificate under this section must be executed in the same manner as though an insurance policy were issued. 80C30 KLA-D 890

- 1 insurer substitutes a certificate for a policy, the insurer shall
- 2 simultaneously provide the insured receiving the certificate with
- 3 an outline of coverages in the form and content approved by the
- 4 commissioner. At the insured's request, the insurer shall provide
- 5 the insured with a copy of the policy.
- 6 (d) The commissioner may adopt rules necessary to implement
- 7 this section, including a rule limiting the application of this
- 8 section to private passenger automobile insurance policies.
- 9 (V.T.I.C. Art. 5.06, Secs. (5), (6).)

10 <u>Source Law</u>

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- (5) An insurer, if in compliance with applicable requirements and conditions, may issue and deliver a certificate of insurance as a substitute for the The certificate of entire policy of insurance. insurance shall make reference to and identify the policy form adopted or approved by the Board for which of certificate substitution is made. certificate shall be in such form as is prescribed by the Board. The certificate will represent the policy of insurance, and when issued, shall be evidence that the certificate holder is insured under the identified The certificate is subject to the same policy form. conditions, limitations, coverages, selection options, and other provisions of the policy as are provided in the policy, and that insurance policy information is to be shown on and adequately referenced by the certificate of insurance issued by the insurer to the insured. Reference shall be made in to the certificate, or in subsequent attachments, to all endorsements to the policy of insurance. The certificate shall be executed in the same manner as though a policy were issued. When the certificate is substituted for the policy of insurance by an insurer, When the certificate is shall simultaneously furnish the insurer to the insured receiving the certificate an "outline coverages", the form and content of which has been approved by the Board. At the request of an insured at any time, an insurer which has substituted certificate for a policy of insurance shall provide a copy of the policy.
- (6) The Board may promulgate such rules as are necessary to implement the certificate in lieu of policy provision herein, including a rule limiting the application thereof to private passenger automobile policies.

Revisor's Note

(1) Section (5), V.T.I.C. Article 5.06, refers to "requirements and conditions" applicable to an insurer. The revised law omits "conditions" because, in this context, "conditions" is included within the meaning of "requirements."

(2) Section (5), V.T.I.C. Article 5.06, requires an insurer that has substituted a certificate of insurance for an insurance policy to provide the insured with a copy of the policy "[a]t the request of [the] insured at any time." The revised law omits "at any time" as unnecessary. The grant of a right to an insured, absent any language limiting the exercise of the right, implies that the insured may exercise the right at any time.

Revised Law

Sec. 1952.056. REQUIRED PROVISION: COVERAGE FOR CERTAIN SPOUSES. A personal automobile insurance policy or any similar policy form adopted or approved by the commissioner under Article 5.06 or filed under Subchapter B, Chapter 2301, that covers liability arising out of ownership, maintenance, or use of a motor vehicle of a spouse who is otherwise insured by the policy must contain a provision to continue coverage for the spouse during a period of separation in contemplation of divorce. (V.T.I.C. Art. 5.06-6.)

Source Law

Art. 5.06-6. A personal automobile policy or any similar policy form adopted or approved by the commissioner under Article 5.06 of this code or filed under Article 5.145 of this code that covers liability arising out of ownership, maintenance, or use of a motor vehicle of a spouse, who is otherwise insured by the policy, shall contain a provision to continue coverage for the spouse during a period of separation in contemplation of divorce.

Revisor's Note

V.T.I.C. Article 5.06-6 refers to a policy form filed under V.T.I.C. Article 5.145. The relevant provisions of that article are revised as Subchapter B, Chapter 2301, of this code. The revised law is drafted accordingly.

Revised Law

Sec. 1952.057. PROHIBITED PROVISION: PAYMENT ON CONVICTION

FOR DRUG OFFENSE. (a) An insurer may not deliver or issue for

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- 1 delivery in this state an automobile insurance policy that provides
- 2 payment on final conviction of the named insured for loss for a
- 3 covered motor vehicle seized by federal or state law enforcement
- 4 officers as evidence in a case against the named insured under
- 5 Chapter 481, Health and Safety Code, or under the federal
- 6 Controlled Substances Act (21 U.S.C. Section 801 et seq.).
- 7 (b) For purposes of this section, a named insured for:
- 8 (1) an individual automobile insurance policy is the
- 9 person named on the declaration page of the policy and the person's
- 10 spouse; and
- 11 (2) an automobile insurance policy other than an
- 12 individual policy is the company or corporation named on the
- 13 declaration page of the policy and any officer, director, or
- 14 shareholder of that company or corporation. (V.T.I.C
- 15 Art. 5.06-5.)

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16 <u>Source Law</u>

- (a) Art. 5.06-5. motor vehicle Α insurance policy delivered or issued for delivery in this state may not provide payment on final conviction of the named insured for loss for a covered motor vehicle that is seized by federal or state law enforcement officers as evidence in a case against the named insured under Chapter 481, Health and Safety Code or the federal Controlled Substances Act, 21 U.S.C. Section 801 et For the purpose of this section a named insured shall be the person named on the declaration page of an automobile insurance policy and his or her spouse if the policy is written on an individual. If a policy is other than an individual policy, a named insured shall be the company or corporation named on the declaration an automobile insurance policy and any director, or stockholder of that company or page officer, corporation.
- (b) An insurer may not deliver or issue for delivery in this state a motor vehicle insurance policy that provides payment on final conviction of the named insured for loss for a covered motor vehicle that is seized by federal or state law enforcement officers as evidence in a case against the named insured under Chapter 481, Health and Safety Code or the federal Controlled Substances Act, 21 U.S.C. Section 801 et seq.

43 <u>Revised Law</u>

Sec. 1952.058. LOSS CONTROL INFORMATION AND SERVICES
REQUIRED. (a) An insurer must provide loss control information as
a prerequisite to writing commercial automobile liability

- 1 insurance in this state.
- 2 (b) The insurer shall provide to the insurer's
- 3 policyholders loss control information reasonably commensurate
- 4 with the risks, exposures, and experience of the insured's
- 5 business. To provide loss control information or services, the
- 6 insurer may:
- 7 (1) employ qualified personnel;
- 8 (2) retain qualified independent contractors;
- 9 (3) contract with the policyholder to provide
- 10 qualified loss control personnel and services; or
- 11 (4) use a combination of methods described by this
- 12 subsection.
- 13 (c) If there is evidence that an insurer is not providing
- 14 reasonable loss control information or is not using that
- 15 information in a reasonable manner to reduce losses, the
- 16 commissioner shall order a hearing to determine whether the insurer
- is in compliance with this section. If the commissioner determines
- 18 that the insurer is not in compliance, the commissioner may impose
- 19 any sanction authorized by Chapter 82.
- 20 (d) An insurer or an agent or employee of the insurer is not
- 21 liable, and a cause of action does not arise against the insurer,
- 22 agent, or employee, for any accident based on the allegation that
- 23 the accident was caused or could have been prevented by a program,
- information, inspection, or other activity or service undertaken by
- 25 the insurer for the prevention of accidents in connection with
- 26 operations of the insured. The immunity provided by this
- 27 subsection does not affect the liability of an insurer for
- 28 compensation or as otherwise provided in an insurance policy.
- 29 (e) Loss control information an insurer provides to an
- 30 insured under this section is not subject to discovery and is not
- 31 admissible as evidence in any civil proceeding.
- 32 (f) The commissioner, after holding a public hearing on the
- 33 proposed rules, may adopt reasonable rules for the enforcement of
- 34 this section. (V.T.I.C. Art. 5.06-4.)

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Art. 5.06-4. (a) Any insurer desiring to write commercial automobile liability insurance in this state must provide loss control information as a prerequisite for writing that insurance.

- (b) The insurer shall provide loss control information to its policyholders reasonably risks and exposures and with the commensurate experience of the insured's business. To provide this information or services, the insurer may employ qualified personnel, retain qualified independent contractors, contract with the policyholder to provide qualified accident prevention personnel and services, or use a combination of the methods provided by this section.
- (c) If there is evidence that reasonable loss control information is not being provided by the insurer or is not being used by the insurer in a reasonable manner to reduce losses, the State Board of Insurance shall order a hearing to determine if the insurer is not in compliance with this article. If it is determined that the insurer is not in compliance, the board may impose any of the sanctions authorized by Section 7, Article 1.10, of this code.
- (d) The State Board of Insurance may promulgate reasonable rules and regulations for the enforcement of this article after holding a public hearing on the proposed rules and regulations.
- (e) An insurer or its agents, servants, or employees are not liable for, and no cause of action arises with respect to, any accident based on the allegation that the accident was caused or could have been prevented by a program, information, inspection, or other activity or service undertaken by the insurer for the prevention of accidents in connection with operations of its insured. However, this immunity does not affect the liability of an insurer for compensation or as otherwise provided in a policy of insurance.
- (f) Loss control information provided by an insurer to an insured pursuant to this article is not subject to discovery or admissible in any civil proceeding as evidence.

Revisor's Note

- (b), V.T.I.C. (1)Section Article 5.06-4, refers to "qualified accident prevention personnel and services." The revised law substitutes "qualified loss control personnel and services" for "qualified accident prevention personnel and services" because "qualified loss control personnel and services" more accurately describes the type of personnel services provided with respect to automobile insurance.
 - (2) Section (d), V.T.I.C. Article 5.06-4,

authorizes the State Board of Insurance to adopt certain "rules and regulations" after holding a public hearing on the proposed "rules and regulations." For the reason stated in Revisor's Note (1) to Section 1952.053, the commissioner of insurance has the authority formerly granted to the board. The revised law omits unnecessary the references as to "regulations" because a rule is defined under Section 311.005(5), Government Code (Code Construction Act), to include a regulation, and that definition applies to the revised law.

[Sections 1952.059-1952.100 reserved for expansion]
SUBCHAPTER C. UNINSURED OR UNDERINSURED MOTORIST COVERAGE

14 Revised Law

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Sec. 1952.101. UNINSURED OR UNDERINSURED MOTORIST COVERAGE REQUIRED. (a) In this section, "uninsured or underinsured motorist coverage" means the provisions of an automobile liability insurance policy that provide for coverage in at least the limits prescribed by Chapter 601, Transportation Code, that protects insureds who are legally entitled to recover from owners or operators of uninsured or underinsured motor vehicles damages for bodily injury, sickness, disease, or death, or property damage resulting from the ownership, maintenance, or use of any motor vehicle.

- (b) An insurer may not deliver or issue for delivery in this state an automobile liability insurance policy, including a policy provided through the Texas Automobile Insurance Plan Association under Chapter 2151, that covers liability arising out of the ownership, maintenance, or use of any motor vehicle unless the insurer provides uninsured or underinsured motorist coverage in the policy or supplemental to the policy.
- 32 (c) The coverage required by this subchapter does not apply 33 if any insured named in the insurance policy rejects the coverage in 34 writing. Unless the named insured requests in writing the coverage

- 1 required by this subchapter, the insurer is not required to provide
- 2 that coverage in or supplemental to a renewal insurance policy if
- 3 the named insured rejected the coverage in connection with an
- 4 insurance policy previously issued to the insured by the same
- 5 insurer or by an affiliated insurer. (V.T.I.C. Art. 5.06-1, Sec.

6 (1).)

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7 Source Law

Art. 5.06-1. automobile (1) No insurance (including insurance issued pursuant to an Assigned Risk Plan established under authority Section 35 of the Texas Motor Vehicle Act), Safety-Responsibility covering liability arising out of the ownership, maintenance, or use of any motor vehicle shall be delivered or issued for delivery in this state unless coverage is provided therein or supplemental thereto, in at least the the described Texas Motor limits Vehicle in provisions Safety-Responsibility Act, under prescribed by the Board, for the protection of persons insured thereunder who are legally entitled to recover damages from owners or operators of uninsured or underinsured motor vehicles because of bodily injury, sickness, or disease, including death, or property damage resulting therefrom. The coverages required under this Article shall not be applicable where any insured named in the policy shall reject the coverage in writing; provided that unless the named insured thereafter requests such coverage in writing, such coverage need not be provided in or supplemental to a renewal policy where the named insured has rejected the coverage in connection with a policy previously issued to him by the same insurer or by an affiliated insurer.

Revisor's Note

(1)Section (1),V.T.I.C. Article 5.06-1,refers "the t.o Texas Motor Vehicle Safety-Responsibility Act" and to an "Assigned Risk Plan established under authority of Section 35 of the Texas Motor Vehicle Safety-Responsibility Act." That act, formerly Article 6701h, Vernon's Texas Civil codified in 1995 as Chapter Statutes, was 601. Transportation Code. Section 35, Article 6701h, provided for insurers to establish an "administrative agency" to administer an assigned risk plan to provide motor vehicle liability insurance to persons "unable to secure it through ordinary methods." Section 35 was

repealed by Section 14.08, Chapter 685, Acts of the 73rd Legislature, Regular Session, 1993. Section 14.03 of that act added V.T.I.C. Article 21.81, which created the Texas Automobile Insurance Association. The association's primary duty is to provide eligible persons with insurance required under the Texas Motor Vehicle Safety-Responsibility Act. Section 14.09(b) of that act required the administrative agency created under Section Article 6701h, to transfer its assets and obligations to the Texas Automobile Insurance Plan Association. Throughout this chapter, the revised law is drafted accordingly.

(1), V.T.I.C. (2) Section Article 5.06 - 1.prohibits an insurer from delivering or issuing for delivery an automobile insurance policy unless the "under provisions insurer provides coverage prescribed by the Board," meaning the commissioner of insurance for the reasons stated in Revisor's Note (1) to Section 1952.053. The revised law omits the quoted phrase as unnecessary and misleading for the reasons that follow. Before June 11, 2003, the commissioner adopted and approved policy forms for automobile insurance under V.T.I.C. Article 5.06. In 2003, the legislature enacted Chapter 206, Acts of the 78th Legislature, Regular Session, which provides that policy forms for various kinds of insurance, including automobile insurance, are now governed by V.T.I.C. Article 5.13-2. However, under Section 2(b), V.T.I.C. Article 5.145, an insurer is authorized to continue using policy forms previously approved or adopted under Article 5.06. Therefore, under the current regulatory system for policy forms for automobile insurance, an insurer is authorized to use policy

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forms that are subject to Article 5.13-2 or to Article 5.06. Those articles by their terms prescribe the requirements for the policy forms that are subject to them, and those requirements apply to the provisions for uninsured or underinsured motorist coverage under Article 5.06-1 contained in the forms without a statement to that effect.

8 Revised Law

Sec. 1952.102. UNINSURED MOTOR VEHICLE. (a) For purposes of the coverage required by this subchapter, "uninsured motor vehicle," subject to the terms of the coverage, is considered to include an insured motor vehicle as to which the insurer providing liability insurance is unable because of insolvency to make payment with respect to the legal liability of the insured within the limits specified in the insurance.

(b) The commissioner may, in the policy forms filed under Subchapter B, Chapter 2301, allow "uninsured motor vehicle" to be defined or, in policy forms adopted under Article 5.06, define "uninsured motor vehicle," to exclude certain motor vehicles whose operators are in fact uninsured. (V.T.I.C. Art. 5.06-1, Secs.

21 (2)(a), (c).)

Source Law

- (2) For the purpose of these coverages: (a) the term "uninsured motor vehicle" shall, subject to the terms and conditions of such coverage, be deemed to include an insured motor vehicle where the liability insurer thereof is unable to make payment with respect to the legal liability of its insured within the limits specified therein because of insolvency.
- (c) The commissioner may, in the policy forms adopted under Article 5.06 of this code, define "uninsured motor vehicle" to exclude certain motor vehicles whose operators are in fact uninsured. The commissioner may in the policy forms filed under Article 5.145 of this code allow the term "uninsured motor vehicle" to be defined to exclude certain motor vehicles whose operators are in fact uninsured.

Revisor's Note

Section (2)(a), V.T.I.C. Article 5.06-1, refers to "terms and conditions" of uninsured motor vehicle

coverage. Throughout this chapter, the revised law omits "conditions" as unnecessary because "conditions" is included within the meaning of "terms."

5 Revised Law

Sec. 1952.103. UNDERINSURED MOTOR VEHICLE. For purposes 6 7 of the coverage required by this subchapter, "underinsured motor vehicle" means an insured motor vehicle on which there 8 9 collectible liability insurance coverage with limits of liability for the owner or operator that were originally lower than, or have 10 been reduced by payment of claims arising from the same accident to, 11 an amount less than the limit of liability stated in the 12 13 underinsured coverage of the insured's policy. (V.T.I.C. 14 Art. 5.06-1, Sec. (2)(b).)

14 Mic. 5.00 1, bec. (2)(b).)

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Source Law

- (2) For the purpose of these coverages:
- (b) The term "underinsured motor vehicle" means an insured motor vehicle on which there is valid and collectible liability insurance coverage with limits of liability for the owner or operator which were originally lower than, or have been reduced by payment of claims arising from the same accident to, an amount less than the limit of liability stated in the underinsured coverage of the insured's policy.

Revisor's Note

Section (2)(b), V.T.I.C. Article 5.06-1, refers
to "valid and collectible" liability insurance
coverage. The revised law omits the reference to
"valid" as unnecessary because a policy that is not
valid is not collectible.

31 Revised Law

- Sec. 1952.104. REQUIRED PROVISIONS RELATING TO UNINSURED OR
 UNDERINSURED MOTORIST COVERAGE. The portion of a policy form
 adopted under Article 5.06 or filed as provided by Subchapter B,
 Chapter 2301, to provide coverage under this subchapter must:
- 36 (1) provide that, regardless of the number of persons 37 insured, policies or bonds applicable, vehicles involved, or claims

sustains bodily injury or property damage as the result of a single occurrence may not exceed the limit of liability for those

made, the total aggregate limit of liability to any one person who

- 4 coverages as stated in the insurance policy and that the total
- 5 aggregate limit of liability to all claimants, if more than one, may
- 6 not exceed the total limit of liability per occurrence as stated in
- 7 the policy;

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- 8 (2) provide for the exclusion of the recovery of
- 9 damages for bodily injury or property damage, or both, resulting
- 10 from the intentional acts of the insured; and
- 11 (3) require that, for the insured to recover under the
- 12 uninsured motorist coverage if the owner or operator of any motor
- 13 vehicle that causes bodily injury or property damage to the insured
- 14 is unknown, actual physical contact must have occurred between the
- 15 motor vehicle owned or operated by the unknown person and the person
- or property of the insured. (V.T.I.C. Art. 5.06-1, Sec. (2)(d).)

17 Source Law

(d) The portion of a policy form adopted under Article 5.06 of this code or filed under Article of this code to provide coverage under this 5.145 article shall include provisions that, regardless of the number of persons insured, policies or bonds applicable, vehicles involved, or claims made, the total aggregate limit of liability to any one person who sustains bodily injury or property damage as the result of any one occurrence shall not exceed the limit liability for these coverages as stated in the of policy and the total aggregate limit of liability to all claimants, if more than one, shall not exceed the total limit of liability per occurrence as stated in the policy; and shall provide for the exclusion of the recovery of damages for bodily injury or property damage or both resulting from the intentional acts of the insured. The portion of a policy form adopted under Article 5.06 of this code or filed under Article 5.145 of this code to provide coverage under this article shall require that in order for the insured to recover under the uninsured motorist coverages where the owner or operator of any motor vehicle which causes bodily injury or property damage to the insured is unknown, actual physical contact must have occurred between the motor vehicle owned or operated by such unknown person and the person or property of the insured.

Revised Law

Sec. 1952.105. LIABILITY LIMITS. (a) The limits of liability for bodily injury, sickness, disease, or death must be 80C30 KLA-D 901

- offered to an insured in the amounts desired by the insured, but not
- 2 in amounts greater than the limits of liability specified in the
- 3 bodily injury liability provisions of the insured's policy.
- 4 (b) Subject to a deductible amount of \$250, coverage for
- 5 property damage must be offered to an insured in the amounts desired
- 6 by the insured, but not in amounts greater than the limits of
- 7 liability specified in the property damage liability provisions of
- 8 the insured's policy.

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- 9 (c) Notwithstanding Subsections (a) and (b), amounts of
- 10 liability limits for bodily injury, sickness, disease, or death and
- 11 amounts for coverage for property damage may not be offered in
- amounts less than those prescribed by Chapter 601, Transportation
- 13 Code. (V.T.I.C. Art. 5.06-1, Secs. (3), (4)(a).)

14 <u>Source Law</u>

- The limits of liability for bodily injury, disease, including death, sickness, or offered to the insured in amounts not less than those prescribed in the Texas Motor Vehicle Safety-Responsibility Act and such higher available limits as may be desired by the insured, but not greater than the limits of liability specified in the bodily injury liability provisions of the insured's policy.
- (4)(a) Coverage for property damage shall be offered to the insured in amounts not less than those prescribed in the Texas Motor Vehicle Safety-Responsibility Act and such higher available limits as may be desired by the insured, but not greater than limits of liability specified in the property damage liability provisions of the insured's policy, subject to a deductible amount of \$250.

32 <u>Revised Law</u>

33 Sec. 1952.106. RECOVERY UNDER UNDERINSURED MOTORIST 34 COVERAGE. Underinsured motorist coverage must provide for payment 35 to the insured of all amounts that the insured is legally entitled to recover as damages from owners or operators of underinsured 36 motor vehicles because of bodily injury or property damage, not to 37 exceed the limit specified in the insurance policy, and reduced by 38 39 the amount recovered or recoverable from the insurer of the

underinsured motor vehicle. (V.T.I.C. Art. 5.06-1, Sec. (5).)

41 Source Law

42 (5) The underinsured motorist coverage shall

provide for payment to the insured of all sums which he shall be legally entitled to recover as damages from owners or operators of underinsured motor vehicles because of bodily injury or property damage in an amount up to the limit specified in the policy, reduced by the amount recovered or recoverable from the insurer of the underinsured motor vehicle.

Revised Law

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- Sec. 1952.107. RECOVERY COMBINED 9 UNDER COLLISION OR COVERAGE. (a) An insured who 10 has collision coverage 11 uninsured or underinsured property damage liability coverage may recover under the coverage the insured chooses. 12
 - (b) If neither the collision coverage or the uninsured or underinsured property damage liability coverage is sufficient alone to cover all damage resulting from a single occurrence, the insured may recover under both coverages. If recovering under both coverages, the insured shall designate one coverage as the primary coverage and pay the deductible applicable to that coverage. The primary coverage must be exhausted before any recovery is made under the secondary coverage.
 - (c) If both the primary and secondary coverages are used to pay damages from a single occurrence, the insured may not be required to pay the deductible applicable to the secondary coverage when the amount of the deductible otherwise applicable to the secondary coverage is the same as or less than the amount of the deductible applicable to the primary coverage. If both coverages are used to pay damages from a single occurrence and the amount of the deductible otherwise applicable to the secondary coverage is greater than the amount of the deductible applicable to the primary coverage, the insured shall pay the difference between the amount of the two deductibles with respect to the secondary coverage.
- 32 (d) The insured may not recover under both the primary and 33 secondary coverages more than the actual damages suffered.
- 34 (V.T.I.C. Art. 5.06-1, Sec. (4)(b).)

35 <u>Source Law</u>

36 (b) If the insured has collision coverage 37 and uninsured or underinsured property damage 38 liability coverage, the insured may recover under the 39 policy coverage chosen by the insured. In the event

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neither coverage is sufficient alone to cover all damage resulting from a single occurrence, the insured may recover under both coverages. When recovering under both coverages, the insured shall designate one the primary and coverage as coverage pay deductible applicable to that coverage. The primary coverage must be exhausted before any recovery is made under the secondary coverage. If both coverages are utilized in the payment of damages from a single occurrence, the insured shall not be required to pay the deductible applicable to the secondary coverage when the amount of the deductible otherwise applicable to the secondary coverage is the same as or less than the amount of the deductible applicable to the primary If both coverages are utilized coverage. payment of damages from a single occurrence and the amount of the deductible otherwise applicable to the secondary coverage is greater than the amount of deductible applicable to the primary coverage, insured shall be required to pay in respect of the the secondary coverage only the difference between amount of the two deductibles. In no event shall the insured recover under both coverages more than the actual damages suffered.

Revised Law

Sec. 1952.108. INSURER'S RIGHT OF RECOVERY. (a) An insurer that makes a payment to any person under any coverage required by this subchapter is subject to the terms of that coverage and, to the extent of the payment, is entitled to the proceeds of any settlement or judgment resulting from the exercise of any right of recovery of the person to whom the payment is made against any person or organization legally responsible for the bodily injury, sickness, disease, or death for which the payment is made, including the proceeds recoverable from the assets of an insolvent insurer.

- (b) If, under an insurance policy issued under this subchapter, an insurer makes a payment as a result of the insolvency of another insurer:
- (1) the insolvent insurer's insured shall be given credit to the extent of the paying insurer's payment in any judgment obtained against the insured with respect to the insured's legal liability for damages described by Subsection (a); and
 - (2) subject to Subchapter F, Chapter 462, the paying insurer has the right to proceed directly against the insolvent insurer or that insurer's receiver, and in pursuing that right the paying insurer has any rights that the insolvent insurer's insured might otherwise have had if the insured had made the payment.

(V.T.I.C. Art. 5.06-1, Sec. (6).)

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2 <u>Source Law</u>

In the event of payment to any person under any coverage required by this Section and subject to the terms and conditions of such coverage, the insurer making such payment shall, to the extent thereof, be entitled to the proceeds of any settlement or judgment resulting from the exercise of any rights of recovery of such person against any person or organization legally responsible for the bodily injury, sickness or disease, or death for which such payment is made, including the proceeds recoverable from the assets of the insolvent insurer; provided, however, whenever an insurer shall make payment under a policy of insurance nt to this Act, which payment the insolvency of an insurer, issued pursuant is occasioned by the insured of said insolvent insurer shall be given credit in any judgment obtained against him, with respect to his legal liability for such damages, to the extent of such payment, but, subject to Section 12 of Article 21.28-C of this code, such paying insurer shall have the right to proceed directly against the insolvent insurer or its receiver, and in pursuance of such right such paying insurer shall possess any rights which the insured of the insolvent company have had if the insured of might otherwise the insolvent insurer had made the payment.

28 Revised Law

Sec. 1952.109. BURDEN OF PROOF IN DISPUTE. The insurer has the burden of proof in a dispute as to whether a motor vehicle is uninsured. (V.T.I.C. Art. 5.06-1, Sec. (7).)

32 Source Law

33 (7) If a dispute exists as to whether a motor 34 vehicle is uninsured, the burden of proof as to that 35 issue shall be upon the insurer.

36 Revised Law

- Sec. 1952.110. VENUE. Notwithstanding Section 15.032,

 Civil Practice and Remedies Code, an action against an insurer in

 relation to the coverage provided under this subchapter, including

 an action to enforce that coverage, may be brought only in the
- 41 county in which:
- 42 (1) the policyholder or beneficiary instituting the 43 action resided at the time of the accident involving the uninsured
- 44 or underinsured motor vehicle; or
- 45 (2) the accident occurred. (V.T.I.C. Art. 5.06-1,
- 46 Sec. (8).)

1	Source Law
2 3 4 5 6 7 8 9 10 11	(8) Notwithstanding Section 15.032, Civil Practice and Remedies Code, an action against an insurer in relation to the coverage provided under this article, including an action to enforce that coverage, may be brought only: (a) in the county in which the policyholder or beneficiary instituting the suit resided at the time of the accident; or (b) in the county in which the accident involving the uninsured or underinsured motor vehicle occurred.
13	[Sections 1952.111-1952.150 reserved for expansion]
14	SUBCHAPTER D. PERSONAL INJURY PROTECTION COVERAGE
15	Revised Law
16	Sec. 1952.151. PERSONAL INJURY PROTECTION. "Personal
17	injury protection" consists of provisions of an automobile
18	liability insurance policy that provide for payment to the named
19	insured in the policy, members of the insured's household, and any
20	authorized operator or passenger of the named insured's motor
21	vehicle, including a guest occupant, of all reasonable expenses
22	that:
23	(1) arise from an accident;
24	(2) are incurred not later than the third anniversary
25	of the date of the accident; and
26	(3) are for:
27	(A) necessary medical, surgical, x-ray, or
28	dental services, including prosthetic devices, and necessary
29	ambulance, hospital, professional nursing, or funeral services;
30	(B) in the case of an income producer,
31	replacement of income lost as the result of the accident; or
32	(C) in the case of a person injured in the
33	accident who was not an income or wage producer at the time of the
34	accident, reimbursement of necessary and reasonable expenses
35	incurred for essential services ordinarily performed by the injured
36	person for care and maintenance of the family or family household.
37	(V.T.I.C. Art. 5.06-3, Sec. (b) (part).)
38	Source Law
39 40	(b) "Personal injury protection" consists of provisions of a motor vehicle liability policy which

provide for payment to the named insured in the motor vehicle liability policy and members of the insured's household, any authorized operator or passenger of the insured's motor vehicle including . . . of all reasonable expenses arising occupant, from the accident and incurred within three years from the date thereof for necessary medical, surgical, services, X-ray and dental including prosthetic devices, and necessary ambulance, hospital, professional nursing and funeral services, and in the case of an income producer, payment of benefits for loss of income as the result of the accident; and where the person injured in the accident was not an income or wage producer at the time of the accident, payments of benefits must be made in reimbursement of necessary reasonable expenses incurred for services ordinarily performed by the injured person for care and maintenance of the family or family household. .

20 Revised Law

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Sec. 1952.152. PERSONAL INJURY PROTECTION COVERAGE REQUIRED. (a) An insurer may not deliver or issue for delivery in this state an automobile liability insurance policy, including a policy provided through the Texas Automobile Insurance Plan Association under Chapter 2151, that covers liability arising out of the ownership, maintenance, or use of any motor vehicle unless the insurer provides personal injury protection coverage in the policy or supplemental to the policy.

(b) The coverage required by this subchapter does not apply if any insured named in the insurance policy rejects the coverage in writing. Unless the named insured requests in writing the coverage required by this subchapter, the insurer is not required to provide that coverage in or supplemental to a renewal insurance policy if the named insured rejected the coverage in connection with an insurance policy previously issued to the insured by the same insurer or by an affiliated insurer. (V.T.I.C. Art. 5.06-3, Sec. (a).)

38 Source Law

Art. 5.06-3. (a) No automobile liability insurance policy, including insurance issued pursuant to an assigned risk plan established under authority 35 Texas Vehicle of Section of the Motor Safety-Responsibility Act, covering liability arising out of the ownership, maintenance, or use of any motor vehicle shall be delivered or issued for delivery in this state unless personal injury protection coverage is provided therein or supplemental thereto. The

applicable if any insured named in the policy shall reject the coverage in writing; provided, unless the named insured thereafter requests such coverage in writing, such coverage need not be provided in or supplemental to a renewal policy if the named insured has rejected the coverage in connection with a policy previously issued to him by the same insurer or by an affiliated insurer.

Revised Law

Sec. 1952.153. MAXIMUM REQUIRED AMOUNT OF PERSONAL.

Sec. 1952.153. MAXIMUM REQUIRED AMOUNT OF PERSONAL INJURY PROTECTION. This subchapter does not require an insurer to provide personal injury protection coverage in an amount that exceeds \$2,500 for all benefits, in the aggregate, for each person.

(V.T.I.C. Art. 5.06-3, Sec. (b) (part).)

15 <u>Source Law</u>

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(b) . . . up to an amount of \$2,500 for each such person for payment . . . The personal injury protection in this paragraph specified shall not exceed \$2,500 for all benefits, in the aggregate, for each person.

21 Revised Law

Sec. 1952.154. LOSS OF INCOME BENEFITS. An insurer providing loss of income benefits under coverage required by this subchapter may require that the insured, as a condition of receiving those benefits, provide the insurer with reasonable medical proof of the insured's injury causing loss of income. (V.T.I.C. Art. 5.06-3, Sec. (b) (part).)

28 Source Law

(b) . . . The insurer providing loss of income benefits may require, as a condition of receiving such benefits, that the insured person furnish the insurer reasonable medical proof of his injury causing loss of income. . .

34 Revised Law

- Sec. 1952.155. BENEFITS PAYABLE WITHOUT REGARD TO FAULT OR COLLATERAL SOURCE; EFFECT ON SUBROGATION. (a) The benefits under coverage required by this subchapter are payable without regard to:
- 38 (1) the fault or nonfault of the named insured or recipient in causing or contributing to the accident; and
- 40 (2) any collateral source of medical, hospital, or 41 wage continuation benefits.
- 42 (b) An insurer paying benefits under coverage required by 80C30 KLA-D 908

- 1 this subchapter does not have a right of subrogation or claim
- 2 against any other person or insurer to recover any benefits by
- 3 reason of the alleged fault of the other person in causing or
- 4 contributing to the accident. (V.T.I.C. Art. 5.06-3, Sec. (c).)

5 Source Law

The benefits required by this Act shall be payable without regard to the fault or non-fault of the named insured or the recipient in causing contributing to the accident, and without regard to any collateral source of medical, hospital, or wage An insurer paying benefits continuation benefits. pursuant to this Act shall have no right of subrogation and no claim against any other person or insurer to recover any such benefits by reason of the alleged fault of such other person in causing or contributing to the accident.

Revised Law

- Sec. 1952.156. PAYMENT OF BENEFITS. (a) Subject to the requirements of this section and Section 1952.157, an insurer shall pay benefits under the coverage required by this subchapter periodically as claims for those benefits arise, but not later than the 30th day after the date the insurer receives satisfactory proof of a claim.
- 24 (b) The coverage required by this subchapter may:
- 25 (1) prescribe a period of not less than six months 26 after the date of an accident within which the original proof of 27 loss with respect to a claim for benefits must be presented to the 28 insurer; and
- (2) provide that an insurer may require reasonable medical proof of an alleged recurrence of an injury for which an original claim for benefits was made if a lapse occurs in the period of total disability or in the medical treatment of an injured person
- 34 (A) has received benefits under that coverage;
- 35 and

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who:

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- 36 (B) subsequently claims additional benefits
- 37 based on the alleged recurrence.
- 38 (c) The aggregate benefits payable under the coverage 39 required by this subchapter to any person may not exceed the maximum 80C30 KLA-D 909

- 1 limits prescribed in the insurance policy. (V.T.I.C. Art. 5.06-3,
- 2 Sec. (d) (part).)

3 <u>Source Law</u>

- (d) All payments of benefits prescribed under this Act shall be made periodically as the claims therefor arise and within thirty (30) days after satisfactory proof thereof is received by the insurer subject to the following limitations:
- (1) The coverage described in this Act may prescribe a period of not less than six months after the date of accident within which the original proof of loss with respect to a claim for benefits must be presented to the insurer.
- (2) The coverage described in this Act may provide that in any instance where a lapse occurs in the period of total disability or in the medical treatment of an injured person who has received benefits under such coverage and such person subsequently claims additional benefits based upon an alleged recurrence of the injury for which the original claim for benefits was made, the insurer may require reasonable medical proof of such alleged recurrence; provided, that in no event shall the aggregate benefits payable to any person exceed the maximum limits prescribed in the policy.

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27 Revised Law

Sec. 1952.157. ACTION FOR FAILURE TO PAY BENEFITS. (a) If the insurer fails to pay benefits under the coverage required by this subchapter when due, the person entitled to those benefits may bring an action in contract to recover the benefits.

(b) If the insurer is required to pay benefits described by Subsection (a), the person entitled to the benefits is entitled to recover reasonable attorney's fees, a penalty of 12 percent, and interest at the legal rate from the date those amounts became overdue. (V.T.I.C. Art. 5.06-3, Sec. (d) (part).)

Source Law

- (d) [All payments of benefits prescribed under this Act shall be made periodically as the claims therefor arise and within thirty (30) days after satisfactory proof thereof is received by the insurer subject to the following limitations:]
- (3) In the event the insurer fails to pay such benefits when due, the person entitled to such benefits may bring an action in contract to recover the same; and, in the event the insurer is required to pay such benefits, the person entitled to such benefits shall be entitled to recover reasonable attorneys fees plus 12% penalty, plus interest thereon at the legal rate from the date such sums became overdue.

1	Revised Law

- 2 Sec. 1952.158. EXCLUSION OF BENEFITS. An insurer shall 3 exclude benefits to an insured or the insured's representative under the coverage required by this subchapter if 4 5 the insured's conduct contributed to the injury the insured sustained and that conduct: 6
- 7 (1) involved intentionally causing injury to the 8 insured; or
- 9 (2) occurred while committing a felony or while 10 seeking to elude lawful apprehension or arrest by a law enforcement 11 official. (V.T.I.C. Art. 5.06-3, Sec. (e).)

12 <u>Source Law</u>

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- (e) An insurer shall exclude benefits to any insured, or his personal representative, under a policy required by Section 1, when the insured's conduct contributed to the injury he sustained in any of the following ways:
 - (1) Causing injury to himself intentionally.
 - (2) While in the commission of a felony, or while seeking to elude lawful apprehension or arrest by a law enforcement official.

Revisor's Note

Section (e), V.T.I.C. Article 5.06-3, refers to a policy required by "Section 1." Neither Article 5.06-3 nor Section (e) contains a Section 1. It is clear from the context of the source law that "Section 1" is referring to Section 1 of Chapter 52, Acts of the 63rd Legislature, Regular Session, 1973, which enacted Article 5.06-3. The substance of Article 5.06-3 is revised throughout this subchapter. Therefore, the revised law substitutes a reference to "this subchapter" for the reference to "Section 1."

Revised Law

Sec. 1952.159. OFFSET AGAINST LIABILITY CLAIM. (a) If a liability claim is made by a guest or passenger described by Section 1952.151 against the owner or operator of the motor vehicle in which the guest or passenger was riding or against the owner's or

- 1 operator's liability insurer, the owner or operator of the motor
- 2 vehicle or the owner's or operator's liability insurer is entitled
- 3 to an offset, credit, or deduction against any award made to the
- 4 guest or passenger in an amount equal to the amounts paid by the
- 5 owner, the operator, or the owner's or operator's automobile
- 6 liability insurer to the guest or passenger under personal injury
- 7 protection.

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- 8 (b) This subchapter does not authorize a direct action
- 9 against a liability insurer if that right does not presently exist
- 10 at law. (V.T.I.C. Art. 5.06-3, Sec. (h).)

11 Source Law

(h) When any liability claim is made by any guest or passenger described in paragraph (b) hereof against the owner or operator of the motor vehicle in which he was riding or the owner's or operator's liability insurance carrier, the owner or operator of such motor vehicle or his liability insurance carrier shall be entitled to an offset, credit or deduction against any award made to such guest or passenger in an amount of money equal to the amounts paid by the owner, operator or his automobile liability insurance carrier under "personal injury protection" as defined in this Act to such guests or passengers; provided, however, that nothing herein shall be construed to authorize a direct action against a liability insurance company if such right does not presently exist at law.

Revised Law

Sec. 1952.160. INAPPLICABILITY TO ACCIDENT OR HEALTH
INSURANCE. This subchapter applies only to an automobile insurance

30 policy subject to this subtitle or Subchapter A, Chapter 5, and does

- 31 not apply to any other accident or health insurance policy,
- 32 regardless of whether the accident or health insurance policy
- 33 provides indemnity against automobile-connected injuries.
- 34 (V.T.I.C. Art. 5.06-3, Sec. (f).)

35 <u>Source Law</u>

(f) This article applies only to motor vehicle insurance policies subject to this subchapter and does not apply to other accident or health policies even though they promise indemnity against automobile-connected injuries.

<u>Revisor's Note</u>

- Section (f), V.T.I.C. Article 5.06-3, refers to
- an automobile insurance policy subject to "this

subchapter," meaning Subchapter A, V.T.I.C. Chapter 5.

Portions of Subchapter A, Chapter 5, are revised in various chapters in this code. The provisions of Subchapter A that are revised and that regulate automobile insurance policies are revised in Subtitle C, Title 10, which includes this chapter. Other provisions of Subchapter A have not been revised. The revised law is drafted accordingly.

9 Revised Law

10 Sec. 1952.161. CERTAIN COVERAGE UNAFFECTED. This
11 subchapter does not:

- (1) affect the offering of medical payments coverage, disability benefits, or accidental death benefits, as presently prescribed by the commissioner; or
- 15 (2) prevent an insurer from providing benefits broader 16 than the minimum benefits described by this subchapter, subject to 17 the rules prescribed by the commissioner. (V.T.I.C. Art. 5.06-3, 18 Sec. (g).)

Source Law

(g) Nothing contained in this Act shall affect the offering of medical payments coverage, disability benefits, and accidental death benefits, as presently prescribed by the State Board of Insurance; and nothing contained in this Act shall be construed to prevent an insurer from providing broader benefits than the minimum benefits enumerated in this Act subject to the rules and forms prescribed by the State Board of Insurance.

Revisor's Note

Section (g), V.T.I.C. Article 5.06-3, refers to "forms prescribed by the State Board of Insurance," meaning the commissioner of insurance for the reasons stated in Revisor's Note (1) to Section 1952.053. The revised law omits the reference to forms prescribed by the commissioner as unnecessary and misleading for the reason stated in Revisor's Note (2) to Section 1952.101.

[Sections 1952.162-1952.200 reserved for expansion]

1	SUBCHAPTER E. SHORT-TERM LIABILITY INSURANCE FOR
2	CERTAIN MOTORISTS
3	Revised Law
4	Sec. 1952.201. APPLICABILITY OF SUBCHAPTER. This
5	subchapter applies to an insurer authorized to write automobile
6	insurance in this state, including an insurance company, reciprocal
7	or interinsurance exchange, mutual insurance company, capital
8	stock company, county mutual insurance company, Lloyd's plan, or
9	other entity. (V.T.I.C. Art. 5.01C, Sec. 1(1).)
10	Source Law
11 12 13 14 15 16	Art. 5.01C Sec. 1. In this article: (1) "Insurer" means an insurance company, interinsurance exchange, mutual, capital stock company, county mutual, reciprocal association, Lloyd's plan insurer, or other entity authorized to write motor vehicle insurance in this state.
18	Revisor's Note
19	Section 1(1), V.T.I.C. Article 5.01C, refers to
20	an "interinsurance exchange," a "mutual," a "county
21	mutual," a "reciprocal association," and a "Lloyd's
22	plan insurer." The revised law substitutes for the
23	quoted language references to a "reciprocal or
24	interinsurance exchange," a "mutual insurance
25	company," a "county mutual insurance company," and a
26	"Lloyd's plan" for the reason stated in Revisor's Note
27	(2) to Section 1952.001.
28	Revised Law
29	Sec. 1952.202. DEFINITIONS. In this subchapter:
30	(1) "Motor vehicle" means any private passenger
31	vehicle or utility type vehicle that has a gross weight of not more
32	than 25,000 pounds.
33	(2) "Short-term liability insurance policy" means an
34	insurance policy that:
35	(A) provides coverage for at least 24 hours but
36	not for more than one week;
37	(B) meets the requirements of Chapter 601,
	80C30 KLA-D 914

1 Transportation Code; 2 (C) covers liability for bodily injury, death, 3 and property damage arising from the use or operation of a motor vehicle; and 4 5 (D) is not insurance assigned to an authorized insurer by the Texas Automobile Insurance Plan Association under 6 7 Section 2151.102(a). (V.T.I.C. Art. 5.01C, Secs. 1(2), (3).) Source Law 8 vehicle" 9 (2) "Motor means any private passenger vehicle or utility type vehicle that has a 10 gross weight of 25,000 pounds or less. 11 "Short-term 12 (3) liability insurance 13 policy" means an insurance policy that: provides coverage for at least 24 14 (A) 15 hours but not for more than one week; 16 (B) meets the requirements of Chapter 17 601, Transportation Code; 18 liability bodily (C) for covers 19 injury, death, and property damage arising from the use or operation of a motor vehicle; and 20 21 (D) is not insurance assigned to an 22 authorized insurance company by the Texas Automobile Insurance Plan Association under Section 4(a), Article 23 24 21.81, of this code. 25 Revised Law Sec. 1952.203. SHORT-TERM LIABILITY INSURANCE PROGRAM. 2.6 27 The commissioner by rule may establish a program to provide for the sale of short-term liability insurance policies to nonresident 28 29 motorists who are visiting this state. 30 The commissioner may negotiate an agreement with any 31 insurer under which the insurer will sell insurance policies described by this section. (V.T.I.C. Art. 5.01C, Sec. 2.) 32 33 Source Law 34

Sec. 2. (a) The commissioner by rule may establish a program to provide for the sale of short-term liability insurance policies to non-Texas resident motorists visiting this state.

(b) The commissioner may negotiate an agreement with any insurer under which the insurer will sell policies described by Subsection (a) of this section.

41 Revised Law

Sec. 1952.204. AGENT LICENSE REQUIRED. A person representing an insurer in selling short-term liability insurance policies under this subchapter must be licensed under Title 13.

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2	Source Law
3 4 5 6	Sec. 3. A person representing an insurer in selling short-term liability insurance policies under this article must be licensed under Subchapter A, Chapter 21, of this code.
7	Revisor's Note
8	Section 3, V.T.I.C. Article 5.01C, requires
9	certain persons to be licensed under "Subchapter A,
10	Chapter 21, of this code." Subchapter A, V.T.I.C.
11	Chapter 21, is revised in various chapters in this
12	code. The portions of Subchapter A, Chapter 21,
13	relevant to licensing agents are revised in Title 13 of
14	this code. The revised law is drafted accordingly.
15	Revised Law
16	Sec. 1952.205. SALE OF SHORT-TERM LIABILITY INSURANCE
17	POLICIES. An insurer selling short-term liability insurance
18	policies under this subchapter shall use policy forms adopted by
19	the commissioner under Article 5.06 or filed and in effect as
20	provided by Subchapter B, Chapter 2301, as applicable, unless the
21	insurer is exempt from using those forms. (V.T.I.C. Art. 5.01C,
22	Sec. 4.)
23	Source Law
24 25 26 27 28 29	Sec. 4. An insurer selling short-term liability insurance policies under this article must use the policy forms adopted by the commissioner under Article 5.06 of this code or filed and in effect as provided by Article 5.145 of this code unless the insurer is exempt from using those forms.
30	[Sections 1952.206-1952.250 reserved for expansion]
31	SUBCHAPTER F. GARAGE INSURANCE
32	Revised Law
33	Sec. 1952.251. DEFINITIONS. In this subchapter:
34	(1) "Garage customer" means a person or organization
35	other than:
36	(A) the named insured under a garage insurance
37	policy;
38	(B) an employee, director, officer, shareholder,
	80C30 KLA-D 916

1 (V.T.I.C. Art. 5.01C, Sec. 3.)

- partner, or agent of the named insured; or 1 2
- (C) a resident of the same household as:
- 3 the named insured; or
- 4 (ii) an employee, director, officer,
- 5 shareholder, partner, or agent of the named insured.
- 6 (2) "Garage insurance" means automobile insurance as
- 7 defined by Article 5.01 issued to a named insured who is engaged in
- the business of selling, servicing, or repairing motor vehicles as 8
- 9 defined by commissioner rule or order. (V.T.I.C. Art. 5.06-2, Sec.
- 10 (1) (part).)

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11 Source Law

Art. 5.06-2. (1) Definitions. As used in this Act:

> (a) "Garage Insurance" means motor vehicle or automobile insurance as defined in Article 5.01 hereof issued to a named insured engaged in the engaged servicing or business of selling, repairing motor as now or hereafter defined by vehicles rules, regulations or orders of the State Board of Insurance;

> "Garage Customer" means any person or (b) organization other than the named insured, or an employee, director, officer, stockholder, partner, or agent of the named insured; or a resident of the same household as the named insured, such employee, director, officer, stockholder, partner, or agent;

Revisor's Note

Section (1)(a), V.T.I.C. Article 5.06-2, refers to motor vehicles "as now or hereafter defined by rules, regulations or orders of the State Board of law omits "as Insurance." The revised hereafter" because under Section 311.027, Government Code (Code Construction Act), applicable to the revised law, a reference to a rule applies to all reenactments, revisions, and amendments of the rule. The reference to "regulations" is omitted from the revised law for the reason stated in Revisor's Note (2) to Section 1952.058.

Revised Law

Sec. 1952.252. GARAGE INSURANCE. (a) A garage insurance policy may provide that a garage customer is not an insured under 80C30 KLA-D 917

- 1 the policy and that the coverage under the policy does not apply to
- 2 a garage customer except to the extent that any other insurance
- 3 coverage that is collectible and available to the garage customer
- 4 is not equal to the minimum financial responsibility limits
- 5 specified by Chapter 601, Transportation Code.
- 6 (b) Notwithstanding any provision to the contrary in
- 7 another insurance policy as to whether the insurance coverage
- 8 described by Subsection (a) that is provided under that policy is
- 9 primary, excess, or contingent insurance, or otherwise, the other
- 10 insurance coverage is the primary insurance as to the garage
- 11 customer.

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- 12 (c) A garage insurance policy containing a provision
- 13 described by Subsection (a) may not cover a garage customer except
- 14 to the extent permitted by this section, notwithstanding the terms
- 15 of the other insurance policy providing coverage described by
- 16 Subsection (a). (V.T.I.C. Art. 5.06-2, Secs. (1) (part), (2).)

17 Source Law

Art. 5.06-2. (1) Definitions. As used in this Act:

(c) "Financial Responsibility Limits" means the minimum limits specified by the Texas Motor Vehicle Safety-Responsibility Act.

A policy of garage insurance may contain a provision to the effect that garage customers are not insureds under the garage insurance policy and that garage insurance shall not apply to garage customers, except to the extent that other valid and collectible insurance, if any, available to the garage customer is not equal to the financial responsibility limits. Notwithstanding any provision to the contrary in such other policy or policies of insurance as to whether such insurance is primary, excess, contingent insurance, or otherwise, such other valid and collectible insurance shall be primary insurance as to the garage customer. Any garage insurance policy containing such a provision shall not cover garage customers except to such extent, notwithstanding the terms and provisions of such other policy or policies of insurance.

Revisor's Note

(1) Section (2), V.T.I.C. Article 5.06-2, refers to "valid and collectible" insurance. The revised law omits "valid" for the reason stated in the revisor's note to Section 1952.103.

(2) Section (2), V.T.I.C. Article 5.06-2, refers to the "terms and provisions" of an insurance policy. The revised law omits "provisions" because, in this context, "provisions" is included in the meaning of "terms."

Revisor's Note (End of Subchapter)

Section (3), V.T.I.C. Article 5.06-2, provides that Article 5.06-2 applies only to "insurance policies issued or renewed or made subject to this Act by endorsement after the effective date hereof." The revised law omits this provision as obsolete. Article 5.06-2 was added by Chapter 35, Acts of the 61st Legislature, 2nd Called Session, 1969. That act took effect September 19, 1969. Any insurance policy issued before that date has, by now, been renewed. The omitted law reads:

(3) This Act shall apply only to insurance policies issued or renewed or made subject to this Act by endorsement after the effective date hereof.

[Sections 1952.253-1952.300 reserved for expansion]

SUBCHAPTER G. REPAIR OF MOTOR VEHICLES

24 Revised Law

- Sec. 1952.301. LIMITATION ON PARTS, PRODUCTS, OR REPAIR PERSONS OR FACILITIES PROHIBITED. (a) Except as provided by rules adopted by the commissioner, under an automobile insurance policy that is delivered, issued for delivery, or renewed in this state, an insurer may not directly or indirectly limit the insurer's coverage under a policy covering damage to a motor vehicle by:
- 31 (1) specifying the brand, type, kind, age, vendor, 32 supplier, or condition of parts or products that may be used to 33 repair the vehicle; or
- 34 (2) limiting the beneficiary of the policy from 35 selecting a repair person or facility to repair damage to the 36 vehicle.

(b) In settling a liability claim by a third party against an insured for property damage claimed by the third party, an insurer may not require the third-party claimant to have repairs made by a particular repair person or facility or to use a particular brand, type, kind, age, vendor, supplier, or condition of parts or products. (V.T.I.C. Art. 5.07-1, Secs. (a), (g).)

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Art. 5.07-1. (a) Except as provided by rules adopted by the duly commissioner, under an insurance policy that is delivered, issued delivery, or renewed in this state an insurer may not, directly or indirectly, limit its coverage under a specifying the brand, type, kind, age, vendor, supplier, or condition of parts or products that may be used to repair the vehicle or by limiting beneficiary. bу beneficiary of the policy from selecting a repair person or facility to repair damage to the motor vehicle covered under the policy.

(g) In the settlement of liability claims by a third party against an insured for property damage claimed by the third party, an insurer may not require the third-party claimant to have repairs made by a particular repair person or facility or to use a particular brand, type, kind, age, vendor, supplier, or condition of parts or products.

Revisor's Note

Section (a), V.T.I.C. Article 5.07-1, refers to rules "duly" adopted by the commissioner of insurance.

The revised law omits "duly" as unnecessary because the term does not add to the clear meaning of the law.

Revised Law

Sec. 1952.302. PROHIBITED ACTS IN CONNECTION WITH REPAIR OF MOTOR VEHICLE. In connection with the repair of damage to a motor vehicle covered under an automobile insurance policy, an insurer, an employee or agent of an insurer, an insurance adjuster, or an entity that employs an insurance adjuster may not:

- (1) solicit or accept a referral fee or gratuity in exchange for referring a beneficiary or third-party claimant to a repair person or facility to repair the damage;
- 41 (2) state or suggest, either orally or in writing, to a 42 beneficiary that the beneficiary must use a specific repair person

- 1 or facility or a repair person or facility identified on a preferred
- 2 list compiled by an insurer for the damage repair or parts
- 3 replacement to be covered by the policy; or
- 4 (3) restrict the right of a beneficiary or third-party
- 5 claimant to choose a repair person or facility by requiring the
- 6 beneficiary or third-party claimant to travel an unreasonable
- 7 distance to repair the damage. (V.T.I.C. Art. 5.07-1, Sec. (b).)

8 Source Law

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- (b) In connection with the repair of damage to a motor vehicle covered under an auto insurance policy, an insurer, an employee of an insurer, an agent of an insurer, a solicitor of insurance for an insurer, an insurance adjuster, or an entity that employs an insurance adjuster may not:
- (1) solicit or accept a referral fee or gratuity in exchange for referring a beneficiary or third-party claimant to a repair person or facility to repair the damage;
- (2) state or suggest, either orally or in writing, to a beneficiary that a specific repair person or facility or a repair person or facility identified on a preferred list compiled by an insurer must be used by a beneficiary in order for the damage repair or parts replacement to be covered by the policy; or
- beneficiary's (3) restrict а third-party claimant's right to choose a repair person facility or beneficiary bу requiring the or claimant third-party to travel an unreasonable distance to repair the damage.

Revisor's Note

Section (b), V.T.I.C. Article 5.07-1, refers to a "solicitor of insurance" for an insurer. The revised law omits the reference to "solicitor" because that term, as it relates to a particular type of person engaged in the business of insurance, was eliminated by Chapter 703, Acts of the 77th Legislature, Regular Session, 2001, and a person who performs the duties formerly performed by a solicitor is now regulated as an "agent."

Revised Law

Sec. 1952.303. CONTRACTS BETWEEN INSURER AND REPAIR PERSON
OR FACILITY. (a) A contract between an insurer and a repair person
or facility, including an agreement under which the repair person

- 1 or facility agrees to extend discounts for parts or labor to the
- 2 insurer in exchange for referrals by the insurer, may not result in
- 3 a reduction of coverage under an insured's automobile insurance
- 4 policy.
- 5 (b) The commissioner may adopt rules under Chapter 542 with
- 6 respect to any fraudulent activity of any party to an agreement
- 7 described by Subsection (a). (V.T.I.C. Art. 5.07-1, Secs. (c),
- 8 (h).)

9 <u>Source Law</u>

- 10 A contract between an insurer and a repair (c) 11 person or facility, including an agreement under which 12 the or facility repair person agrees to discounts for parts or labor to the insurer in exchange for referrals by the insurer, may not result in a reduction of coverage under the insured's auto 13 14 15 reduction of coverage under insured's 16 insurance policy.
- (h) The commissioner may exercise the rule-making authority under Article 21.21-2 of this code with respect to any fraudulent activity of any party to an agreement described by Subsection (c) of this article.
- 22 Revised Law
- Sec. 1952.304. PROVISION OF INFORMATION REGARDING
- 24 REPAIRS. An insurer may not prohibit a repair person or facility
- 25 from providing a beneficiary or third-party claimant with
- 26 information that states:
- 27 (1) the description, manufacturer, or source of the
- 28 parts used; and
- 29 (2) the amounts charged to the insurer for the parts
- 30 and related labor. (V.T.I.C. Art. 5.07-1, Sec. (d).)

31 <u>Source Law</u>

32 An insurer may not prohibit a repair person facility providing 33 from beneficiary or а third-party claimant with information that states the 34 description, manufacturer, or source of the parts used 35 36 and the amounts charged to the insurer for the parts 37 and related labor.

38 <u>Revised Law</u>

- 39 Sec. 1952.305. NOTICE OF RIGHTS REGARDING REPAIR OF MOTOR
- 40 VEHICLE. (a) At the time a motor vehicle is presented to an
- 41 insurer, an insurance adjuster, or other person in connection with

- 1 a claim for damage repair, the insurer, insurance adjuster, or
- 2 other person shall provide to the beneficiary or third-party
- 3 claimant notice of the provisions of this subchapter.
- 4 (b) The commissioner shall adopt a rule establishing the
- 5 method or methods insurers must use to comply with the notice
- 6 provisions of this section. (V.T.I.C. Art. 5.07-1, Sec. (e).)

7 Source Law

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(e) At the time the vehicle is presented to an insurer or an insurance adjuster or other person in connection with a claim for damage repair, the insurer or insurance adjuster or other person shall provide to the beneficiary or third-party claimant notice of the provisions of this article. The commissioner shall rule establishing the method methods adopt a or shall insurers use to comply with the provisions in this subsection.

Revised Law

Sec. 1952.306. COMPLAINTS. A beneficiary, third-party claimant, or repair person or facility may submit a written,

- 20 documented complaint to the department with respect to an alleged
- violation of this subchapter. (V.T.I.C. Art. 5.07-1, Sec. (f).)

22 Source Law

23 (f) Any beneficiary, third-party claimant, or 24 repair person or facility may submit a written, 25 documented complaint to the department with respect to 26 an alleged violation of this article.

27 <u>Revised Law</u>

- Sec. 1952.307. RULES. Rules adopted by the commissioner to implement this subchapter must include requirements that:
- 30 (1) any limitation described by Section 1952.301(a) be
- 31 clearly and prominently displayed on the face of the insurance
- 32 policy or certificate in lieu of an insurance policy; and
- 33 (2) the insured give written consent to a limitation
- 34 described by Section 1952.301(a) after the insured is notified
- 35 orally and in writing of the limitation at the time the insurance
- 36 policy is purchased. (V.T.I.C. Art. 5.07-1, Sec. (i).)

37 Source Law

38 (i) Any rules adopted by the commissioner to 39 implement this article shall include, but not be 40 limited to, requirements that:

(1) any limitation described in Subsection

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1 2 3 4 5 6 7	 (a) of this section is clearly and prominently displayed on the face of the policy or certificate in lieu of a policy; and
8	Revisor's Note
9	Section (i), V.T.I.C. Article 5.07-1, states that
10	rules shall "include, but not be limited to," certain
11	requirements. "[B]ut not be limited to" is omitted as
12	unnecessary because Section 311.005(13), Government
13	Code (Code Construction Act), applicable to the
14	revised law, and Section 312.011(19), Government Code,
15	provide that "includes" and "including" are terms of
16	enlargement and not of limitation and do not create a
17	presumption that components not expressed are
18	excluded.
19	[Chapters 1953-2000 reserved for expansion]
20	SUBTITLE D. FIRE INSURANCE AND ALLIED LINES,
21	INCLUDING RESIDENTIAL PROPERTY INSURANCE
22	CHAPTER 2001. GENERAL PROVISIONS: FIRE INSURANCE AND ALLIED
23	LINES, INCLUDING RESIDENTIAL PROPERTY INSURANCE
24	Sec. 2001.001. APPLICABILITY OF SUBTITLE925
25	Sec. 2001.002. RATES
26	Sec. 2001.003. AUTHORITY TO REQUIRE SWORN STATEMENTS928
27	Sec. 2001.004. AUTHORITY TO INSPECT AND TAKE TESTIMONY
28	REGARDING RECORDS
29	Sec. 2001.005. AUTHORITY TO REQUIRE PROVISION OF DATA 933
30	Sec. 2001.006. REPORT OF INFORMATION RELATING TO
31	CERTAIN FIRE LOSSES
32	Sec. 2001.007. CRIMINAL PENALTY
33	Sec. 2001.008. IMMUNITY FROM PROSECUTION938
34	Sec. 2001.009. LIMITATION ON COMPENSATION AND EXPENSES939
35	Sec. 2001.010. PUBLIC GUIDE RELATING TO COMMERCIAL
36	PROPERTY RATING

1	CHAPTER 2001. GENERAL PROVISIONS: FIRE INSURANCE AND ALLIED
2	LINES, INCLUDING RESIDENTIAL PROPERTY INSURANCE
3	Revised Law
4	Sec. 2001.001. APPLICABILITY OF SUBTITLE. (a) Each
5	insurance policy or contract insuring property in this state
6	against loss by fire, including a policy or contract or portion of a
7	policy or contract that insures the shore end of a marine risk
8	against loss by fire, must be issued in accordance with:
9	(1) this chapter;
10	(2) Section 403.002;
11	(3) Subchapter C, Chapter 5;
12	(4) Subchapter H, Chapter 544;
13	(5) Subchapter D, Chapter 1806; and
14	(6) Chapters 252, 2002, 2003, 2004, 2005, 2006, and
15	2171.
16	(b) An insurer issuing an insurance policy or contract
17	described by Subsection (a), including a fire insurance company,
18	marine insurance company, fire and marine insurance company, and
19	fire and tornado insurance company, is governed by the laws
20	described by Subsection (a).
21	(c) This section applies to an insurer or to an insurance
22	policy or contract regardless of:
23	(1) the kind and character of property insured;
24	(2) whether the property is:
25	(A) fixed or movable;
26	(B) stationary or in transit; or
27	(C) consigned or billed for shipment inside or
28	outside the boundaries of this state or to a foreign country;
29	(3) whether the insurer is organized:
30	(A) under the laws of this state, another state,
31	territory, or possession of the United States, or a foreign
32	country; or
33	(B) by authority of the federal government; or
34	(4) the kind of insurer or the name of the insurer
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issuing the policy or contract. (V.T.I.C. Art. 5.27 (part).)

Source Law

Every fire insurance company, every Art. 5.27. insurance every fire and marine marine company, insurance company, every fire and tornado insurance company, and each and every insurance company of every name issuing a contract or policy of or contracts or policies of insurance kind and name insurance, against loss by fire on property within this State, whether such property be fixed or movable, stationary or in transit, or whether such property is consigned or billed for shipment within or beyond the boundary of this State or to some foreign county, whether such company is organized under the laws of this State or state, territory under the laws of any other possession of the United States, or foreign country, by authority of the Federal Government, or Inow holding certificate of authority to transact business in this State, shall be deemed to have accepted such certificate and to transact business thereunder, upon condition that it consents to the terms and provisions of this subchapter and that it agrees to transact business in this State, subject thereto;] it being intended that every contract or policy of insurance hazard of fire against the shall be issued and provisions accordance with the terms of subchapter, and the company issuing the same governed thereby, regardless of the kind and character of such property and whether the same is fixed or movable, stationary or in transit, including the shore end of all marine risks insured against loss by fire.

Revisor's Note

- (1) V.T.I.C. Article 5.27 refers to a foreign "county." It is clear from the context that "county" is a typographical error and that the legislature intended to refer to a foreign "country." The revised law is drafted accordingly.
- (2) V.T.I.C. Article 5.27 requires insurance policy and an insurer that issues a fire insurance policy to comply with "this subchapter," meaning Subchapter C, V.T.I.C. Chapter 5. Included in Subchapter C, Chapter 5, were V.T.I.C. Articles 5.43-4, 5.44, 5.49, 5.53, and 5.54. Article 5.43-4 was revised in 1999 as Chapter 2154, Occupations Code, Article 5.44 was revised in 1987 as Section 417.008, Government Code, and Article 5.49 was revised, effective April 1, 2005, in part in Chapter 251 of this code. In addition, Articles 5.53 and 5.54 are revised

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in part as Chapter 1807 of this code. The revised law does not reference the statutes revising those articles because those provisions do not regulate fire insurance policies or insurers with respect to issuing those policies.

6 Revised Law

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Sec. 2001.002. RATES. (a) Rates for all lines of insurance subject to a law described by Section 2001.001(a) are determined as provided by Chapter 2251 and Article 5.13-2.

(b) The requirement imposed by Subsection (a) does not affect the requirement for the commissioner to conduct inspections of commercial property and prescribe a manual of rules and rating schedules for commercial property under a law described by Section 2001.001(a). (V.T.I.C. Art. 5.25, Sec. (b); Art. 5.28, Sec. (d).)

Source Law

[Art. 5.25]

(b) Notwithstanding Subsection (a) of article, on and after the effective date of S.B. No. 14, Acts of the 78th Legislature, Regular Session, 2003, rates for homeowners and residential fire and residential allied lines insurance coverage under this subchapter are determined as provided by Subchapter Q of this chapter, and rates for other lines of insurance subject to this subchapter are determined as provided by Article 5.13-2 of this code, except that on and 1, 2004, rates for all lines after December insurance subject to this subchapter are determined as provided by Article 5.13-2 of this code. subsection does not affect the requirement for the commissioner to conduct inspections of commercial property and prescribe a manual of rules and rating schedules for commercial property under subchapter.

[Art. 5.28]

(d) Notwithstanding Subsection (a) of this article, on and after the effective date of S.B. No. 14, Acts of the 78th Legislature, Regular Session, 2003, rates for homeowners and residential fire and residential allied lines insurance coverage under this subchapter are determined as provided by Subchapter Q of this chapter, and rates for other lines of insurance subject to this subchapter are determined as provided by Article 5.13-2 of this code, except that on and after December 1, 2004, rates for all lines of insurance subject to this subchapter are determined as provided by Article 5.13-2 of this code.

Revisor's Note

Section (b), V.T.I.C. Article 5.25, and Section

(d), V.T.I.C. Article 5.28, provide that notwithstanding Section (a) of the respective articles, on and after the effective date of S.B. No. 14, Acts of the 78th Legislature, Regular Session, 2003, rates for homeowners and residential fire and residential allied lines insurance coverage under Subchapter C, V.T.I.C. Chapter 5, are determined as provided by Subchapter Q of that chapter, and rates for other lines of insurance subject to Subchapter C of that chapter are determined as provided by V.T.I.C. Article 5.13-2, revised in part in Chapter 2251, except that on and after December 1, 2004, rates for all lines of insurance subject to Subchapter C of that chapter are determined as provided by V.T.I.C. Article 5.13-2. The revised law omits as executed the references to the law governing insurance rates before December 1, 2004.

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In addition, the relevant provisions of Article 5.13-2 that are revised are contained in Chapter 2251 of this code. Although that chapter contains other provisions that are derived from V.T.I.C. Article 5.13-2C, the revised law appropriately refers to Chapter 2251 in its entirety because the provisions that are derived from Article 5.13-2C are necessary to construe the provisions of Article 5.13-2 that are revised in that chapter.

Revised Law

Sec. 2001.003. AUTHORITY TO REQUIRE SWORN STATEMENTS. For an insurer described by Section 2001.001, the department may require from the insurer or a director, officer, representative, or agent of the insurer a sworn statement covering any period that states:

(1) the rates and premiums collected for fire insurance on each class of risks and on all property in this state;

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- 1 (2) the causes of fire, if known to the insurer or 2 individual or if the insurer or individual possesses relevant 3 information or data or can obtain the information or data at 4 reasonable expense; and
- 5 (3) all necessary facts and information to allow the 6 department to determine enforcement and to enforce a law described 7 by Section 2001.001(a). (V.T.I.C. Art. 5.28, Sec. (a) (part).)

8 Source Law

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Art. 5.28. (a) Said Board is authorized and empowered to require sworn statements for any period of time from any insurance company affected by this law its of directors, officers, any representatives, general agents, state agents, special agents, and local agents of the rates and premiums collected for fire insurance on each class of representatives, risks, on all property in this State and of the causes of fire, if such be known, if they are in possession of such data, and information, or can obtain it at a reasonable expense; and said Board is empowered to require such statements showing all necessary facts information to enable said Board and to determine and assist in the enforcement of provisions of this law.

Revisor's Note

- (1)Section (a), V.T.I.C. Article 5.28, refers the "Board," meaning the Board of Insurance Commissioners. Under Chapter 499, Acts of the 55th Legislature, Regular Session, 1957, administration of the insurance laws of this state was reorganized and the powers and duties of the Board of Insurance Commissioners were transferred to the State Board of Insurance. Chapter 685, Acts of the 73rd Legislature, Regular Session, 1993, abolished the State Board of Insurance and transferred its the functions to commissioner of insurance and the Texas Department of Insurance. Throughout this chapter, references to the board have been changed appropriately.
- (2) Section (a), V.T.I.C. Article 5.28, refers to an "insurance company affected by this law" and to "the provisions of this law." The article is derived from Section 12, Chapter 106, General Laws, Acts of the

33rd Legislature, Regular Session, 1913, which refers to an insurance company affected by "this Act," meaning Chapter 106. Chapter 106 repealed the then existing laws regulating fire insurance and fire insurance companies and established a new system of regulating that insurance and those companies. Chapter 106 and amendments to that chapter were codified in 1951 as Subchapter C, V.T.I.C. Chapter 5. The relevant portions of Subchapter C that are revised are revised in Title 10, which includes this chapter, and elsewhere in this code. As explained in Revisor's Note (2) to Section 2001.001, Section 2001.001 describes the insurers affected by the relevant provisions of Subchapter C and does not reference the irrelevant statutes revising V.T.I.C. Articles 5.43-4 Therefore, the revised law substitutes a and 5.44. reference to an "insurer described by Section 2001.001" for the reference to an "insurance company affected by this law," and substitutes a reference to "a law described by Section 2001.001(a)" for the reference to "the provisions of this law."

(3) Section (a), V.T.I.C. Article 5.28, refers to the "representatives, general agents, state agents, special agents, and local agents" of certain insurers. The terms "general agent," "state agent," "special agent," and "local agent" are obsolete terms that describe the types of agents that may represent those insurers. Therefore, the revised law omits "general agents, state agents, special agents, and local agents" as obsolete terms that are included within the meaning of "representative" and "agent." Similar changes have been made throughout this chapter.

Revised Law

Sec. 2001.004. AUTHORITY TO INSPECT AND TAKE TESTIMONY

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- 1 REGARDING RECORDS. (a) The commissioner or a person authorized by
- 2 the commissioner may:
- 3 (1) visit:
- 4 (A) a general, local, or other office of an
- 5 insurer engaged in the business of insurance in this state;
- 6 (B) the insurer's home office located outside
- 7 this state, if applicable; and
- 8 (C) the office of any of the insurer's officers,
- 9 directors, agents, or other representatives; and
- 10 (2) require the insurer or an officer, director,
- 11 agent, or other representative of the insurer to produce for
- 12 inspection by the commissioner or the commissioner's authorized
- 13 representative all of the books, records, and papers of the
- insurer, officer, director, agent, or representative.
- 15 (b) The commissioner or the commissioner's authorized
- 16 representative may:

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- 17 (1) examine and make or have made copies of the books,
- 18 records, and papers described by Subsection (a); and
- 19 (2) take testimony under oath regarding the books,
- 20 records, and papers and compel the attendance of witnesses for that
- 21 purpose. (V.T.I.C. Art. 5.28, Sec. (b).)

22 <u>Source Law</u>

The said Board shall also have the right, at its discretion, either personally, or by someone duly authorized by it, to visit the office whether general, local or otherwise, of any insurance company doing business in this State, and the home office of said company outside of this State, if there be such, and the office of any officers, directors, general agents, state agents, local agents or representatives of such company, and there require such company, its officers, agents or representatives, to produce for inspection by said Board or any of its duly authorized representatives all books, records and papers of such company or such agents and representatives; and the Board or duly authorized its agents representatives shall have the right to examine such books and papers and make or cause to be made copies thereof; and shall have the right to take testimony under oath with reference thereto, and to compel the attendance of witnesses for such purpose.

<u>Revisor's Note</u>

(1) Section (b), V.T.I.C. Article 5.28,

provides that in addition to the powers provided by Section (a) of that article the commissioner of insurance "also" has certain additional powers. The revised law omits "also" as unnecessary. An accepted general principle of statutory construction requires a statute to be given cumulative effect with other statutes unless it provides otherwise or unless the statutes are in conflict. The general principle applies to this revision.

- Section (b), V.T.I.C. Article 5.28, authorizes the commissioner of insurance or a person "duly" authorized by the commissioner to require certain persons to produce certain records inspection by the commissioner or the commissioner's "duly authorized representatives" and authorizes the commissioner or the commissioner's "duly authorized agents or representatives" to examine and copy the records produced and take testimony regarding the records. The revised law omits "duly" as unnecessary because the word does not add to the clear meaning of the law. In addition, the revised law substitutes a "authorized reference commissioner's to the representative" for the reference to "authorized representatives" in this context for agents or consistency of terminology and because "authorized agent" is included within the meaning of "authorized representative."
- (3) Section (b), V.T.I.C. Article 5.28, provides that the commissioner of insurance or an authorized person may require production of certain "books, records and papers," examine "such books and papers," make copies "thereof," and take testimony with reference "thereto." For consistency, the revised law refers to "books, records, and papers" in

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2 Revised Law

3 Sec. 2001.005. AUTHORITY TO REQUIRE PROVISION OF DATA. The department may require:

- 5 (1) any or all of the fire insurance companies engaged 6 in the business of insurance in this state to jointly or separately 7 provide to the department any data the company or companies 8 possess, including maps, tariffs, inspection reports, and any data 9 affecting fire insurance risks in this state or any part of this 10 state; and
- 11 (2) any two or more of those companies or any joint 12 agents or representatives of the companies to provide to the 13 department for use in implementing a law described by Section 14 2001.001(a) any data the companies, agents, or representatives 15 possess. (V.T.I.C. Art. 5.28, Sec. (c).)

16 <u>Source Law</u>

(c) Said Board shall be further empowered to require the fire insurance companies transacting business in this State or any of them, to furnish said Board with any and all data which may be in their possession, either jointly or severally, including maps, tariffs, inspection reports and any and all data affecting fire insurance risks in this State, or in any portion thereof, and said Board shall be empowered to require any two (2) or more of said companies, or any joint agent or representative of them, to turn over any and all such data in their possession, or any part thereof, to said Board for its use in carrying out the provisions of this law.

Revisor's Note

Section (c), V.T.I.C. Article 5.28, provides that, in addition to the powers provided by Sections (a) and (b) of that article, the Texas Department of Insurance is "further" empowered. The revised law omits "further" for the reason stated in Revisor's Note (1) to Section 2001.004.

Revised Law

Sec. 2001.006. REPORT OF INFORMATION RELATING TO CERTAIN
FIRE LOSSES. (a) The state fire marshal, a fire marshal of a
political subdivision of this state, the chief of a fire department
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- 1 in this state, or a peace officer in this state may request an
- 2 insurer investigating a fire loss of property in which damages or
- 3 losses exceed \$1,000 to release information in the insurer's
- 4 possession relating to that loss. The insurer shall release the
- 5 requested information and cooperate with the official. The
- 6 requested information may include only:
- 7 (1) an insurance policy relevant to the fire loss
- 8 under investigation and any application for a policy;
- 9 (2) policy premium payment records;
- 10 (3) the history of the insured's previous claims for
- 11 fire loss; and
- 12 (4) material relating to the investigation of the
- 13 loss, including:
- 14 (A) statements of any person;
- 15 (B) proof of loss; or
- 16 (C) other relevant evidence.
- 17 (b) This section does not authorize a public official or
- 18 agency to adopt or require any type of periodic report by an
- 19 insurer.
- 20 (c) An insurer that has reason to suspect that a fire loss to
- 21 the property of a person insured by the insurer was caused by
- 22 incendiary means and that receives a request for information under
- 23 Subsection (a) shall:
- 24 (1) notify the requesting official and provide the
- official with all relevant material acquired during the insurer's
- 26 investigation of the fire loss;
- 27 (2) cooperate with and take any action requested of
- the insurer by a law enforcement agency; and
- 29 (3) permit a person ordered by a court to inspect any
- 30 of the insurer's records relating to the insurance policy and the
- 31 loss.
- 32 (d) In the absence of fraud or malice, an insurer or a person
- 33 who provided information on the insurer's behalf is not liable for
- 34 damages in a civil action or subject to criminal prosecution for an

- 1 oral or written statement made or any other action taken that is
- 2 necessary to supply information required under this section.
- 3 (e) An official or a department or agency employee who
- 4 receives information under this section shall maintain the
- 5 confidentiality of the information until the information is
- 6 required to be released in a criminal or civil proceeding.
- 7 (f) An official described by Subsection (a) may be required
- 8 to testify as to any information in the official's possession
- 9 regarding the fire loss of property in a civil action in which a
- 10 person seeks recovery for the loss from an insurer under an
- 11 insurance policy.
- 12 (g) A person may not intentionally:
- 13 (1) refuse to release information requested under
- 14 Subsection (a);
- 15 (2) refuse to notify the fire marshal of a fire loss
- 16 required to be reported under Subsection (c);
- 17 (3) refuse to provide the fire marshal with relevant
- information required to be provided under Subsection (c); or
- 19 (4) fail to maintain the confidentiality of
- 20 information that is confidential under Subsection (e). (V.T.I.C.
- 21 Art. 5.46.)

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22 <u>Source Law</u>

- Art. 5.46. (A) The State Fire Marshal, any fire marshal of a political subdivision in Texas, or the chief of any established fire department in Texas, or any peace officer in Texas, may request any insurance company investigating a fire loss of real or personal property in which damages or losses exceed \$1,000 to release information in its possession relative to that loss. The company shall release the information and cooperate with any official authorized to request such information pursuant to this section. The information may include but not exceed:
- (1) any insurance policy relevant to a fire loss under investigation and any application for such a policy;
 - (2) policy premium payment records;
- (3) history of previous claims made by the insured for fire loss;
- (4) material relating to the investigation of the loss, including statements of any person, proof of loss, or other relevant evidence.
- (5) The provisions of this section shall not be construed to authorize a public official or agency to promulgate or require any type or form of

periodic report by an insurer.

- (B) If an insurance company has reason to suspect that a fire loss to its insured's real or personal property was caused by incendiary means and if it receives a request for information pursuant to Section (A) of this article, the company shall notify the requesting official and furnish him with all relevant material acquired during its investigation of the fire loss, cooperate with and take such action as may be requested of it by any law enforcement agency, and permit any person ordered by a court to inspect any of its records pertaining to the policy and the loss.
- (C) In the absence of fraud or malice no insurance company or person who furnished information on its behalf is liable for damages in a civil action or subject to criminal prosecution for oral or written statement made or any other action taken that is necessary to supply information required pursuant to this section.
- (D) The officials and departmental and agency personnel receiving any information furnished pursuant to this section shall hold the information in confidence until such time as its release is required pursuant to a criminal or civil proceeding.
- (E) Any official referred to in Section (A) of this article may be required to testify as to any information in his possession regarding the fire loss of real or personal property in any civil action in which any person seeks recovery under a policy against an insurance company for the fire loss.
- (F)(1) No person shall purposely refuse to release any information requested pursuant to Section (A) of this article.
- (2) No person shall purposely refuse to notify the fire marshal of a fire loss required to be reported pursuant to Section (B) of this article.
- (3) No person shall purposely refuse to supply the fire marshal with pertinent information required to be furnished pursuant to Section (B) of this article.
- (4) No person shall purposely fail to hold in confidence information required to be held in confidence by Section (D) of this article.

Revisor's Note

- (1) Sections (A), (B), and (E), V.T.I.C. Article 5.46, refer to "real or personal" property. The revised law omits the reference to "real or personal" as unnecessary because Section 311.005(4), Government Code (Code Construction Act), applicable to the revised law, defines "property" as real and personal property.
- (2) Section (A)(5), V.T.I.C. Article 5.46, refers to any "type or form" of periodic report by an insurer. The reference to "form" is omitted from the revised law because "form" is included within the

- 1 meaning of "type."
- 2 (3) Section (F), V.T.I.C. Article 5.46,
- 3 prohibits a person from "purposely" refusing or
- 4 failing to take certain actions. The revised law
- 5 substitutes "intentionally" for "purposely" because,
- 6 in the context of this section, "purposely" and
- 7 "intentionally" are synonymous and "intentionally" is
- 8 more commonly used.

9 Revised Law

- 10 Sec. 2001.007. CRIMINAL PENALTY. (a) An officer or
- director of a fire insurance company described by Section 2001.001,
- or an agent or person acting on behalf of or employed by a fire
- insurance company described by Section 2001.001, commits an offense
- 14 if the officer, director, agent, or person intentionally:
- 15 (1) performs or causes to be performed, alone or in
- 16 conjunction with a corporation, company, or person, an act
- 17 prohibited by a law described by Section 2001.001(a);
- 18 (2) fails to perform an act required to be performed by
- a law described by Section 2001.001(a);
- 20 (3) permits an act prohibited by a law described by
- 21 Section 2001.001(a); or
- 22 (4) otherwise violates a law described by Section
- 23 2001.001(a).

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- 24 (b) An offense under this section is a misdemeanor
- 25 punishable by a fine of not less than \$300 or more than \$1,000.
- 26 (V.T.I.C. Art. 5.48-1.)

27 <u>Source Law</u>

Art. 5.48-1. Any officer or director of any fire insurance company affected by the statutes of this State creating the State Insurance Commission, or any agent, or any one acting or employed by such company who alone or in conjunction with any corporation, company or person, shall wilfully do or cause to be done any act prohibited or declared to be unlawful by such statutes, or who wilfully fails to do any act required to be done by such statutes, or who shall wilfully permit any act directed not to be done, or who shall be guilty of any wilful infraction of such statutes, shall be fined not less than three hundred nor more than one thousand dollars.

Revisor's Note

- (1) V.T.I.C. Article 5.48-1 imposes a criminal penalty on a fire insurance company "affected by the statutes of this State creating the State Insurance Commission" for certain violations of those statutes. The article is derived from Section 26, Chapter 106, General Laws, Acts of the 33rd Legislature, Regular Session, 1913, which refers to an insurance company "affected by this Act." The revised law substitutes "described by Section 2001.001" for the quoted language for the reason stated in Revisor's Note (2) to Section 2001.003.
- (2) V.T.I.C. Article 5.48-1 refers to a person who "wilfully" engages in certain violations of this code. The revised law substitutes "intentionally" for "wilfully" because the terms are synonymous and "intentional" is the term prescribed by Section 6.02, Penal Code, which classifies culpable mental states in criminal offenses.
- (3) V.T.I.C. Article 5.48-1 refers to a person who intentionally performs an act "prohibited or declared to be unlawful" by certain provisions of this code. The reference to "declared to be unlawful" is omitted from the revised law because "declared to be unlawful" is included within the meaning of "prohibited."
- (4) V.T.I.C. Article 5.48-1 states that an offense under that article is punishable by a fine. The revised law adds a statement that the offense is a "misdemeanor" to conform to the way offenses are described by the Penal Code.

32 Revised Law

33 Sec. 2001.008. IMMUNITY FROM PROSECUTION. (a) A person is
34 not excused from giving testimony or producing evidence when
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- 1 legally required at the trial of another person charged with
- 2 violating a law relating to fire insurance on the ground that the
- 3 testimony or evidence may incriminate the person under the laws of
- 4 this state.

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- 5 (b) A person may not be prosecuted or subjected to a penalty
- 6 or forfeiture for or because of a transaction, matter, or thing
- 7 about which the person testifies or produces evidence under this
- 8 section. (V.T.I.C. Art. 5.48-2.)

9 <u>Source Law</u>

Art. 5.48-2. No person shall be excused from giving testimony or producing evidence when legally called upon to do so at the trial of another charged with violating any provision of the laws relating to fire insurance on the ground that it may incriminate him under the laws of this State; but no person shall be prosecuted or subjected to any penalty or forfeiture for, or on account of, any transaction, matter or thing concerning which he may testify or produce evidence under this law.

20 <u>Revised Law</u>

Sec. 2001.009. LIMITATION ON COMPENSATION AND EXPENSES.

22 The total amount of necessary compensation for experts, clerical

- 23 personnel, and other department employees and necessary expenses,
- 24 including travel expenses, incurred by the department in
- 25 implementing the laws described by Section 2001.001(a) may not
- 26 exceed the amount of the assessments on the gross premiums of all
- 27 fire insurance companies engaged in the business of insurance in
- 28 this state. (V.T.I.C. Art. 5.51 (part).)

29 Source Law

Art. 5.51. The necessary compensation of experts, clerical force, and other persons employed by said Board, and all necessary traveling expenses, and such other expenses as may be necessary, incurred in carrying out the provisions of this subchapter, [shall be paid by warrants drawn by the Comptroller upon the order of said Board.] The total amount of all salaries and said other expenses shall not exceed the sum produced by the assessments on the gross premiums of all fire insurance companies doing business in this State.

Revisor's Note

V.T.I.C. Article 5.51 provides that the necessary compensation and expenses incurred by the Texas

Department of Insurance in implementing Subchapter C, V.T.I.C. Chapter 5, shall be paid by warrants drawn by the comptroller on the order of the department. The revised law omits that provision because it is substantively duplicative of provisions contained in Chapter 2103, Government Code, which is a comprehensive law covering procedures for withdrawing money from the state treasury. The omitted law reads:

Art. 5.51. [The necessary compensation of experts, clerical force, and other persons employed by said Board, and all necessary traveling expenses, and such other expenses as may be necessary, incurred in carrying out the provisions of this subchapter,] shall be paid by warrants drawn by the Comptroller upon the order of said Board. . . .

Revised Law

- Sec. 2001.010. PUBLIC GUIDE RELATING TO COMMERCIAL PROPERTY
 RATING. (a) In this section, "rating agency" means a public or
 private legal entity that is authorized to conduct commercial
 property rating in this state.
- 23 (b) The commissioner shall make available to the public a 24 generalized guide that:
- 25 (1) summarizes the procedures used by the department 26 or other rating agency to rate nonresidential commercial buildings 27 in this state; and
- 28 (2) specifies how different construction elements and 29 techniques used in a building project affect the insurance rating 30 of the completed building.
- 31 (c) The commissioner may charge a reasonable fee to cover 32 the administrative costs of producing and distributing the guide.
- 33 (d) The commissioner shall review the information in the 34 guide in January of each odd-numbered year and shall revise the 35 guide as necessary to incorporate any changes that have occurred in 36 the preceding biennium that affect the information. (V.T.I.C. 37 Art. 5.25-1.)

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1 2 Art. 5.25-1. 3 4 5 department οr 6 8 elements 9 10 (b) 11 to cover 12 13 (c) The 14 information in 15 16 17 18 information. 19 (d) For 20 21 22 this state. 23 2.4 25 (1)26 27 28 29 30 31 32 33 34 35 36 effect. 37 38 39

Source Law

Art. 5.25-1. (a) The commissioner shall make available to the public a generalized guide that:

(1) summarizes the procedures used by the department or other rating agency to rate nonresidential commercial buildings in this state; and

(2) specifies how different construction elements and techniques used in a building project affect the insurance rating of the completed building.

(b) The commissioner may charge a reasonable fee to cover the administrative costs of producing and distributing the guide.

(c) The commissioner shall review the information in the guide in January of each odd-numbered year and shall revise the guide as necessary to incorporate any changes that have occurred in the preceding biennium that affect the information.

(d) For purposes of this article, "rating agency" means a public or private legal entity that is authorized to conduct commercial property rating in this state.

Revisor's Note (End of Chapter)

V.T.I.C. Article 5.42 provides in part that an insurance policy "heretofore issued" that provides that the policy is void if premiums are not paid before a date specified by the policy is in effect if the insurer or an agent of the insurer accepted the premium on the policy after that specified date. That article was derived without substantive change from Chapter 106, General Laws, Acts of the 33rd Legislature, Regular Session, 1913, which took effect July 2, 1913. Therefore, that provision applies only to policies that were issued before July 2, 1913, and that remain According to the Texas Department Insurance, there are no policies described by Article 5.42 that remain in effect. For that reason, revised law omits that provision as obsolete. The omitted law reads:

Art. 5.42. . . . All policies heretofore issued which provide that said policies shall be void for non-payment of premiums at a certain specified time, shall be and the same are in full force and effect, provided, that the company or any of its agents have accepted the premium on said policies after the expiration of the dates

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named in said provisions fixing the date of payment.

(2) V.T.I.C. Article 5.47 provides that if an insurer violates Subchapter C, V.T.I.C. Chapter 5, the commissioner of insurance shall, with the consent of the attorney general, cancel the insurer's certificate of authority to engage in the business of insurance in this state. Article 5.47 was derived without substantive change from Chapter 106, General Laws, Acts of the 33rd Legislature, Regular Session, 1913. That article is omitted from the revised law because it was impliedly repealed by Section 7, V.T.I.C. Article 1.10, which was enacted by Chapter 491, Acts of the 52nd Legislature, Regular Session, 1951. That section was revised in 1999 in relevant part as Section 82.051 of this code, which authorizes the commissioner of insurance to cancel or revoke an authorization if the holder of the authorization is found to be in violation of, or to have failed to comply with, this code or a rule of the commissioner, but which does not require the attorney general's consent to take that action. The omitted law reads:

Art. 5.47. If any insurance company affected by the provisions of this subchapter shall violate any provision of this subchapter, the Board shall, by and with the consent of the Attorney General, cancel its certificate of authority to transact business in this State.

(3) V.T.I.C. Article 5.48 authorizes the commissioner of insurance, with the consent of the attorney general, to revoke the authorization of an insurer or an officer, agent, or other representative of the insurer if the commissioner determines that the insurer, officer, agent, or representative has violated Subchapter C, V.T.I.C. Chapter 5. Τn addition, that article provides that the revocation of an authorization under that article does not affect

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the liability of the insurer, officer, agent, or representative for any other penalty provided by law. Finally, that article provides that an action, decision, or determination of the commissioner and the attorney general in a case under that article is subject to review by the courts of this state.

Article 5.48 was derived without substantive change from Chapter 106, General Laws, Acts of the 33rd Legislature, Regular Session, 1913. The parts of that article authorizing the commissioner, with the consent of the attorney general, to revoke an authorization are omitted from the revised law for the reason stated in Revisor's Note (2) to the end of this chapter. revised law also omits the parts of the article providing for judicial review as duplicative Subchapter D, Chapter 36, of this code, which provides for judicial review of an action, decision, or ruling of the commissioner. In addition, the revised law omits as unnecessary the part of Article 5.48 relating to the cumulative effect of that article. The omitted law reads:

Art. 5.48. The Board, ascertaining that any insurance company or officer, agent or representative thereof, has violated any provision of subchapter, may, at its discretion, with the consent and approval of the Attorney General, revoke the certificate of authority of such company, officer, agent, or representative but such revocation of any certificate shall in no manner affect the liability of such company, officer, agent, or representative to the infliction of any other penalty provided by law. action, decision or determination of the Board and the Attorney General in such cases shall be subject to the review of the courts of this State as herein provided.

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1	CHAPTER 2002. POLICY PROVISIONS AND FORMS FOR FIRE INSURANCE AND
2	ALLIED LINES, INCLUDING RESIDENTIAL PROPERTY INSURANCE
3	SUBCHAPTER A. POLICY PROVISIONS
4	Sec. 2002.001. ENDORSEMENTS REDUCING AMOUNT OF
5	COVERAGE
6	Sec. 2002.002. LIEN ON INSURED PROPERTY945
7	Sec. 2002.003. COVERAGES FOR SPOUSES AND FORMER
8	SPOUSES
9	Sec. 2002.004. JEWELRY COVERAGE
10	Sec. 2002.005. COINSURANCE CLAUSES
11	Sec. 2002.006. PROVISIONS GOVERNING CERTAIN CONDITIONS
12	OR RISKS
13	[Sections 2002.007-2002.050 reserved for expansion]
14	SUBCHAPTER B. POLICY FORMS
15	Sec. 2002.051. POLICY FORMS AND ENDORSEMENTS FOR
16	RESIDENTIAL PROPERTY INSURANCE 955
17	Sec. 2002.052. APPLICABILITY OF OTHER LAW TO
18	RESIDENTIAL PROPERTY INSURANCE 955
19	[Sections 2002.053-2002.100 reserved for expansion]
20	SUBCHAPTER C. ITEMS PROVIDED TO POLICYHOLDER IN CONNECTION WITH
21	INSURANCE POLICY
22	Sec. 2002.101. RATE ANALYSIS956
23	Sec. 2002.102. NOTICE OF RENEWAL
24	CHAPTER 2002. POLICY PROVISIONS AND FORMS FOR FIRE INSURANCE AND
25	ALLIED LINES, INCLUDING RESIDENTIAL PROPERTY INSURANCE
26	SUBCHAPTER A. POLICY PROVISIONS
27	Revised Law
28	Sec. 2002.001. ENDORSEMENTS REDUCING AMOUNT OF
29	COVERAGE. An insurer may not use an endorsement to a policy form to
30	which Article 5.35, Subchapter B, or Subchapter B, Chapter 2301,
31	applies that reduces the amount of coverage that would otherwise be
32	provided under the policy unless:
33	(1) the insured requests the endorsement; or
34	(2) the insurer provides the policyholder with a

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- 1 written explanation of the change made by the endorsement before
- 2 the effective date of the change. (V.T.I.C. Art. 5.36.)

3 <u>Source Law</u>

Art. 5.36. An insurer may not use an endorsement to a policy form to which Article 5.35 of this code or Article 5.145 of this code applies that reduces the amount of coverage, unless requested by the insured, that would otherwise be provided under the policy unless the insurer provides the policyholder with a written explanation of the change made by the endorsement before the effective date of the change.

12 Revised Law

Sec. 2002.002. LIEN ON INSURED PROPERTY. A provision in an insurance policy issued by an insurer subject to this subtitle or Subchapter C, Chapter 5, is void if the provision states that the encumbrance of the insured property by a lien of any character at the time of or after the policy's issuance renders the policy void. (V.T.I.C. Art. 5.37.)

19 Source Law

Art. 5.37. Any provision in any policy of insurance issued by any company subject to the provisions of this subchapter to the effect that if said property is encumbered by a lien of any character or shall after the issuance of such policy become encumbered by a lien of any character, then such encumbrance shall render such policy void, shall be of no force and effect. Any such provision within or placed upon any such policy shall be null and void.

Revisor's Note

- (1) V.T.I.C. Article 5.37 refers to "this subchapter," meaning Subchapter C, V.T.I.C. Chapter 5. Portions of that subchapter have been revised in various titles of this code. The relevant provisions of Subchapter C, Chapter 5, that are revised are revised in Subtitle D, Title 10, of this code, which includes this chapter. For that reason, the revised law substitutes a reference to "this subtitle or Subchapter C, Chapter 5," for references to "this subchapter" throughout this chapter.
- (2) V.T.I.C. Article 5.37 provides that certain provisions in an insurance policy "shall be of no force

and effect" and "shall be null and void." Throughout this subchapter, the revised law omits "shall be of no force and effect," "shall be null," and similar phrases because those phrases are included in the meaning of "is void."

6 Revised Law

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Sec. 2002.003. COVERAGES FOR SPOUSES AND FORMER SPOUSES. A homeowners insurance policy or fire insurance policy promulgated under Article 5.35 or filed and in effect as provided by Subchapter B, Chapter 2301, may not be delivered, issued for delivery, or renewed in this state unless the policy contains the following language: "It is understood and agreed that this policy, subject to all other terms and conditions contained in this policy, when covering residential community property, as defined by state law, shall remain in full force and effect as to the interest of each spouse covered, irrespective of divorce or change of ownership between the spouses unless excluded by endorsement attached to this policy until the expiration of the policy or until canceled in accordance with the terms and conditions of this policy."

(V.T.I.C. Art. 5.35-1.)

21 <u>Source Law</u>

Art. 5.35-1. A homeowner's policy or fire policy promulgated under Article 5.35 of this code or filed and in effect as provided by Article 5.145 of this code may not be delivered, issued for delivery, or renewed in this state unless the policy contains the following language: "It is understood and agreed that this policy, subject to all other terms and conditions contained in this policy, when covering residential community property, as defined by state law, shall remain in full force and effect as to the interest of each spouse covered, irrespective of divorce or change of ownership between the spouses unless excluded by endorsement attached to this policy until the policy of expiration until canceled or in accordance with the terms and conditions of policy."

<u>Revised Law</u>

Sec. 2002.004. JEWELRY COVERAGE. (a) In this section, "personal property insurance" means insurance against damage to or loss of tangible personal property, including coverage provided in

- 1 a homeowners insurance policy, residential fire and allied lines
- 2 insurance policy, or farm and ranch owners insurance policy.
- 3 (b) This section applies to each insurer that provides
- 4 personal property insurance in this state, including a county
- 5 mutual insurance company, farm mutual insurance company, Lloyd's
- 6 plan, and reciprocal or interinsurance exchange.
- 7 (c) An insurer that provides personal property insurance
- 8 coverage in this state for jewelry may elect to pay either:
- 9 (1) the stated value of the jewelry item; or
- 10 (2) the actual cost of replacing the jewelry item with
- one of like kind and quality. (V.T.I.C. Art. 5.35-2.)

12 <u>Source Law</u>

13 Art. 5.35-2

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27 28 Sec. 1. In this article, "personal property insurance" means insurance against damage to or loss of tangible personal property, including coverage provided in a homeowners policy, residential fire and allied lines policy, or farm and ranch owners policy.

Sec. 2. This article applies to each insurer that provides personal property insurance in this state, including a county mutual insurer, farm mutual insurer, Lloyd's plan, or reciprocal or interinsurance exchange.

Sec. 3. An insurer that provides personal property insurance coverage in this state for jewelry will have the option to elect either to pay the stated value or actual replacement of the jewelry item with one of like kind and quality.

29 <u>Revised Law</u>

- 30 Sec. 2002.005. COINSURANCE CLAUSES. (a) Except as
 31 otherwise provided by this section, an insurer subject to this
 32 subtitle or Subchapter C, Chapter 5, may not issue an insurance
 33 policy or contract covering property in this state that contains a
 34 clause that:
- 35 (1) requires the insured to obtain or maintain a 36 larger amount of insurance than expressed in the policy or
- 37 contract; or
- 38 (2) in any way provides that the insured is liable as a
- 39 coinsurer with the insurer issuing the policy or contract for any
- 40 part of the loss or damage that may be caused by fire to the property
- 41 described in the policy or contract.

(b) A clause described by Subsection (a) is void.

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- 2 (c) A coinsurance clause may be included in an insurance 3 policy written on cotton, grain, or other products in the process of 4 marketing, shipping, storing, or manufacturing.
- 5 An insured may be given an option to accept an insurance policy or contract that contains a clause described by Subsection 6 7 (a) covering a class of property other than the property described by Subsection (c), a private dwelling, or a stock of merchandise 8 9 offered for sale at retail that has a value of less than \$10,000, if the insured is allowed a reduction in the premium rate for the 10 11 policy or contract. A clause to which this subsection applies is 12 valid and binding. The commissioner may promulgate the premium 13 rates that apply to a coinsurance clause under this subsection.
- (e) The commissioner by order may authorize or require the use of any form of coinsurance clause in connection with an insurance policy that insures against the hazards of tornado, windstorm, and hail on any class of property. The commissioner may adopt rules with reference to:
 - (1) coinsurance clauses authorized or required by this subsection and the use of those clauses; and
- 21 (2) credits in premium rates for the use of 22 coinsurance clauses authorized or required by this subsection. 23 (V.T.I.C. Art. 5.38.)

24 Source Law

Art. 5.38. No company subject to the provisions of this subchapter may issue any policy or contract of insurance covering property in this State, which shall contain any clause or provision requiring the assured to take out or maintain a larger amount of insurance than expressed in such policy, nor in any way providing that the assured shall be liable as a co-insurer with the company issuing the policy for any part of the loss or damage which may be caused by fire to the property described in such policy, and any such clause or provisions, except as herein provided, shall be null and void, and of no effect; provided, co-insurance clauses and provisions may be inserted in policies upon cotton, grain, or other products written shipping, of marketing, storing process manufacturing.

Provided, further, it shall be optional with an insured to accept a policy or contract of insurance containing such clause or provision covering other

classes of property, except private dwellings, and except stocks of merchandise offered for sale at retail when of a value less than Ten Thousand (\$10,000.00) Dollars, when a reduction in the rate is allowed for such policy, and said clause in such policy shall be valid and binding; and the Board of Insurance Commissioners shall have power to name the rates to apply when such co-insurance clause or provision shall be used.

Provided, further, that by appropriate order the Board of Insurance Commissioners may authorize, and in its discretion require the use of any form of co-insurance clauses on or in connection with insurance policies covering against the hazards of tornado, windstorm and hail, on any or all classes of property; the Board to make such rules and regulations with reference to such clauses and the use thereof, as well as credits in premium rates for the use thereof on policies covering against the hazards mentioned as it may deem proper.

Revisor's Note

- (1) V.T.I.C. Article 5.38 refers to a "clause or provision" of an insurance policy or contract. The revised law omits "provision" because, in this context, "provision" is included in the meaning of "clause."
- (2) V.T.I.C. Article 5.38 refers to the "Board of Insurance Commissioners." Under Chapter 499, Acts Legislature, Regular Session, the 55th administration of the insurance laws of this state was reorganized and the powers and duties of the Board of Insurance Commissioners were transferred to the State Board of Insurance. Chapter 685, Acts of the 73rd Legislature, Regular Session, 1993, abolished the State Board of Insurance and transferred its functions to the commissioner of insurance and the Texas Throughout this chapter, Department of Insurance. references to the Board of Insurance Commissioners or the "Board" have been changed appropriately.
- (3) V.T.I.C. Article 5.38 refers to "rules and regulations." The reference to "regulations" is omitted from the revised law because under Section 311.005(5), Government Code (Code Construction Act), a rule is defined to include a regulation. That

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                                Revised Law
                           PROVISIONS GOVERNING CERTAIN CONDITIONS OR
           Sec. 2002.006.
 3
                  This chapter; Sections 403.002, 2001.001-2001.006,
 4
     RISKS. (a)
 5
     2001.009, and 2001.010; Subchapter H, Chapter 544; Subchapter D,
     Chapter 1806; Chapters 2003, 2004, 2006, and 2171; and Articles
 6
     5.25, 5.25A, 5.25-3, 5.26, 5.27, 5.28, 5.29, 5.30, 5.31, 5.32,
 7
     5.34, 5.35, 5.39, 5.40, and 5.41 govern the following in the same
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     manner and to the same extent those provisions govern fire
     insurance and fire insurance rates:
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                (1)
                     insurance coverage for any of the following
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     conditions or risks:
                      (A)
                          weather or climatic conditions, including
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     lightning, tornado, windstorm, hail, cyclone, rain, or frost and
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     freeze;
16
                      (B)
                          earthquake or volcanic eruption;
17
                      (C)
                          smoke or smudge;
18
                      (D)
                          excess or deficiency of moisture;
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                      (E)
                          flood;
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                      (F)
                          the rising water of an ocean or an ocean's
21
     tributary;
                      (G)
                          bombardment, invasion, insurrection, riot,
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     civil war or commotion, military or usurped power, or any order of a
     civil authority made to prevent the spread of a conflagration,
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25
     epidemic or catastrophe;
                         vandalism or malicious mischief;
26
                      (H)
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                      (I)
                          strike or lockout;
                          explosion, as provided by Subsection (b);
28
                      (J)
                          water or other fluid or substance resulting
29
                      (K)
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     from:
                           (i) the breakage or leakage of a sprinkler,
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     pump, or other apparatus erected for extinguishing fire, or a water
     pipe or other conduit or container; or
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                           (ii) casual water
                                                entering a
                                                              building
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definition applies to the revised law.

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- 1 through a leak or opening in the building or by seepage through
- 2 building walls; or
- 3 (L) accidental damage to a sprinkler, pump, fire
- 4 apparatus, pipe, or other conduit or container described by
- 5 Paragraph (K)(i);
- 6 (2) premium rates in this state for the insurance
- 7 described by Subdivision (1); and
- 8 (3) all matters pertaining to the insurance described
- 9 by Subdivision (1), except as provided by this section with respect
- to marine insurance as defined by Section 1807.001.
- 11 (b) In this section:
- 12 (1) "explosion" includes:
- 13 (A) the explosion of a pressure vessel, other
- 14 than a steam boiler of more than 15 pounds pressure, in a building
- designed and used solely for residential purposes by not more than
- 16 four families;
- 17 (B) an explosion of any kind originating outside
- 18 of an insured building or outside of the building containing the
- 19 insured property;
- 20 (C) the explosion of a pressure vessel that does
- 21 not contain steam or that is not operated with steam coils or steam
- 22 jets; and
- 23 (D) an electric disturbance causing or
- 24 concomitant with an explosion in public service or public utility
- 25 property; and
- 26 (2) insurance coverage for explosion does not include
- 27 coverage for loss of or damage to any property of the insured
- 28 resulting from the explosion of or injury to:
- 29 (A) a boiler, heater, or other fired pressure
- 30 vessel;
- 31 (B) an unfired pressure vessel;
- 32 (C) a pipe or container connected with a boiler
- or vessel described by Paragraph (A) or (B);
- 34 (D) an engine, turbine, compressor, pump, or

- 1 wheel;
- 2 (E) an apparatus generating, transmitting, or
- 3 using electricity; or
- 4 (F) any other machinery or apparatus connected
- 5 with or operated by a boiler, vessel, or machine described by
- 6 Paragraphs (A)-(E).
- 7 (c) This section does not apply to:
- 8 (1) a farm mutual insurance company operating under
- 9 Chapter 911;
- 10 (2) a county mutual insurance company operating under
- 11 Chapter 912;
- 12 (3) a mutual insurance company engaged in business
- under Chapter 12, Title 78, Revised Statutes, before that chapter's
- 14 repeal by Section 18, Chapter 40, Acts of the 41st Legislature, 1st
- 15 Called Session, 1929, as amended by Section 1, Chapter 60, General
- 16 Laws, Acts of the 41st Legislature, 2nd Called Session, 1929, that
- 17 retains the rights and privileges under the repealed law to the
- 18 extent provided by those sections;
- 19 (4) the making of inspections or issuance of
- 20 certificates of inspections on a boiler, apparatus, or machinery
- 21 described by Subsection (b)(2), whether insured or otherwise; or
- 22 (5) the insurance of a vessel or craft, its cargo,
- 23 marine builder's risk, marine protection and indemnity, or another
- 24 risk commonly insured under a marine insurance policy, as
- 25 distinguished from an inland marine insurance policy. (V.T.I.C.
- 26 Art. 5.52, Secs. (a), (c); Art. 5.53 (part); Art. 5.54 (part).)

27 Source Law

The writing Art. 5.52. (a) of insurance against loss by lightning, tornado, windstorm, hail, smudge, cyclone, earthquake, eruption, rain, frost and freeze, weather or climatic conditions, excess or deficiency of moisture, flood, rising of the waters of the ocean tributaries, bombardment, insurrection, invasion, riot, civil war or commotion, military or usurped power, any order of a civil authority made to prevent conflagration, of the spread epidemic а or catastrophe, vandalism or malicious mischief, strike lockout, explosion, water or other fluid substance, resulting from the breakage or leakage of

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sprinklers, pumps, or other apparatus erected for extinguishing fires, water pipes or other conduits or containers, or resulting from casual water entering through leaks or openings in buildings, or by seepage through building walls, including insurance against accidental injury of such sprinklers, pumps, fire apparatus, conduits or containers, and the rates to be collected therefor in this State, and all matters pertaining to such insurance except as hereinafter set out as to marine insurance as defined by Article 5.53 of this code, shall be governed and controlled by the provisions of Articles 5.25 to 5.48, inclusive, and also Articles 5.50 to 5.51, inclusive, of this subchapter and Article 5.67 of Subchapter D of this Chapter, in the same manner and to the same extent as fire insurance and fire insurance rates are now affected by the provisions of said articles of this code.

The term "explosion" as used in this article (c) shall not include insurance against loss of or damage to any property of the insured, resulting from the explosion of or injury to (a) any boiler, heater, or other fired pressure vessel; (b) any unfired pressure vessel; (c) pipes or containers connected with any of said boilers or vessels; (d) any engine, turbine, compressor, pump, or wheel; (e) any apparatus generating, transmitting or using electricity; (f) any other machinery or apparatus connected with or operating by any of the previously named boilers, vessels or machines; nor shall same include the making inspections and issuance of certificates of οf inspections upon any such boiler, apparatus or machinery, whether insured or otherwise. Said term shall include, but shall not be limited to (1) the explosion of pressure vessels (except steam boilers of more than fifteen pounds pressure) in buildings designed and used solely for residential purposes by not more than four (4) families; (2) explosion of any kind originating outside of the insured buildings or outside of the building containing the property insured; (3) explosion of pressure vessels which do not contain steam or which are not operated with steam coils or steam jets; (4) electric disturbance causing or concomitant with an explosion in public service or public utility property.

Art. 5.53. . . . None of the terms contained in Article 5.52 shall be deemed to include insurance of vessels or craft, their cargoes, marine builder's risk, marine protection and indemnity, or other risk commonly insured under marine as distinguished from inland marine insurance policies. . . .

Art. 5.54. Nothing in Articles [5.49,] 5.52 and [5.53] of this subchapter shall ever be construed to apply to any farm mutual insurance company operating under Chapter 16 of this Code or to any company now operating under Chapter 12, of Title 78, which has heretofore been repealed. Nothing in Articles 5.52 and [5.53] of this subchapter shall ever be construed to apply to any county mutual insurance company operating under Chapter 17 of this Code.

Revisor's Note

(1) Section (a), V.T.I.C. Article 5.52, refers to the "writing of insurance against loss by"

specified occurrences. For drafting convenience and consistency throughout this code, the revised law substitutes "insurance coverage for any of the following conditions or risks" for the quoted language.

- (2) Section (a), V.T.I.C. Article 5.52, provides that V.T.I.C. "Articles 5.25 to 5.48, inclusive, and also Articles 5.50 to 5.51, inclusive, . . . and Article 5.67" govern certain kinds of insurance coverage, including premium rates for that insurance, in the same manner and to the same extent those provisions govern fire insurance and fire insurance rates. Included in those articles are V.T.I.C. Articles 5.43-1, 5.43-2, and 5.43-3, V.T.I.C. Article 5.43-4, which was revised in 1999 as Chapter 2154, Occupations Code, V.T.I.C. Article 5.44, which was revised in 1987 as Section 417.008, Government Code, and V.T.I.C. Article 5.67, revised in this code as Section 2051.051. The revised law does not reference those provisions because they do not govern fire insurance or fire insurance rates.
- (3) Section (a), V.T.I.C. Article 5.52, provides that the writing of insurance against certain risks is "governed and controlled" by specified laws. The revised law omits the reference to "controlled" because "controlled" is included in the meaning of "governed."
- (4) Section (b), V.T.I.C. Article 5.52, provides that rain insurance and hail insurance on farm crops are governed by V.T.I.C. Article 5.13-2. The revised law omits this provision as unnecessary. Sections 2(a)(12) and (13), V.T.I.C. Article 5.13-2, revised as Sections 2251.003(b)(12) and (13) and 2301.003(b)(12) and (13) of this code, apply to all of

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- the kinds of insurance described by Section (a),

 V.T.I.C. Article 5.52, including rain insurance and

 hail insurance on farm crops, and it is unnecessary to

 repeat that in this chapter. The omitted law reads:
 - (b) Notwithstanding Subsection (a) of this section, rain insurance and hail insurance on farm crops are governed by Article 5.13-2 of this code.
 - Section (c), V.T.I.C. Article 5.52, refers to "include, but shall not be limited to." "[B]ut shall not be limited to" is omitted as unnecessary because Section 311.005(13), Government Code (Code Construction Act), and Section 312.011(19), Government Code, applicable to the revised law, provide that "includes" and "including" are terms of enlargement and not of limitation and do not create a presumption that components not expressed excluded.

[Sections 2002.007-2002.050 reserved for expansion]

SUBCHAPTER B. POLICY FORMS

21 Revised Law

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Sec. 2002.051. POLICY 22 FORMS AND ENDORSEMENTS FOR RESIDENTIAL PROPERTY INSURANCE. 23 Notwithstanding Subsections 24 (a)-(j), Article 5.35, policy forms and endorsements for 25 residential property insurance in this state are regulated under Subchapter A, Chapter 2301, and Article 5.13-2. (V.T.I.C. Art. 26

27 5.35, Sec. (k)(1), as added Acts 78th Leg., R.S., Ch. 206.)

Source Law

(k)(1) Notwithstanding Subsections (a)-(j) of this article, policy forms and endorsements for residential property insurance in this state are regulated under Article 5.13-2 of this code.

33 Revised Law

Sec. 2002.052. APPLICABILITY OF OTHER LAW TO RESIDENTIAL 34 35 PROPERTY INSURANCE. An insurer may continue to use a policy form 36 endorsement promulgated, approved, adopted by Οľ the 37 commissioner under Article 5.35 before June 11, 2003, on 80C30 KLA-D 955

- 1 notification in writing to the commissioner that the insurer will
- 2 continue to use the policy form or endorsement. (V.T.I.C.
- 3 Art. 5.35, Sec. (k)(2), as added Acts 78th Leg., R.S., Ch. 206.)

4 Source Law

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(2) An insurer may continue to use the policy forms and endorsements promulgated, approved, or adopted by the commissioner under this article before the effective date of S.B. No. 14, Acts of the 78th Legislature, Regular Session, 2003, on notification in writing to the commissioner that the insurer will continue to use the policy forms and endorsements promulgated, approved, or adopted by the commissioner under this article.

Revisor's Note

Section (k)(2), V.T.I.C. Article 5.35, as added by Chapter 206, Acts of the 78th Legislature, Regular Session, 2003, refers to policy forms and endorsements promulgated, approved, or adopted under V.T.I.C. Article 5.35 "before the effective date of S.B. No. 14, Acts of the 78th Legislature, Regular Session, 2003." That act took effect June 11, 2003. The revised law substitutes that date for the quoted language.

[Sections 2002.053-2002.100 reserved for expansion]
SUBCHAPTER C. ITEMS PROVIDED TO POLICYHOLDER IN CONNECTION WITH

INSURANCE POLICY

26 Revised Law

Sec. 2002.101. RATE ANALYSIS. (a) On issuing a fire insurance policy, an insurer engaged in the business of fire insurance in this state shall provide the policyholder with a written analysis of the rate or premium charged for the policy showing the items of charge and credit that determine the rate or premium.

33 (b) Subsection (a) does not apply if the insurer has 34 previously provided the policyholder with an analysis of the rate 35 or premium. (V.T.I.C. Art. 5.30, Sec. (a) (part).)

36 Source Law

Art. 5.30. (a) When a policy of fire insurance shall be issued by any company transacting the business of fire insurance in this State, such company

shall furnish the policyholder with a written or printed analysis of the rate or premium charged for 1 2 3 such policy, showing the items of charge and credit 4 which determine the rate, unless such policyholder has 5 theretofore been furnished with such analysis of such 6 7 Revisor's Note 8 Section (a), V.T.I.C. Article 5.30, refers to a "written or printed" analysis. The revised law omits 9 reference to "printed" because "printed" 10 the included in the meaning of "written." 11 12 Revised Law NOTICE OF RENEWAL. 13 Sec. 2002.102. (a) An insurer, 14 including a farm mutual insurance company, county mutual insurance company, Lloyd's plan, or reciprocal or interinsurance exchange, 15 16 that renews a homeowners insurance policy, fire and residential 17 allied lines insurance policy, farm and ranch owners insurance policy, or farm and ranch insurance policy must provide the 18 19 policyholder with written notice of any difference between each form of the policy offered to the policyholder on renewal and the 20 21 form of the policy held immediately before renewal. 22 A notice provided under this section must be written in 23 plain language. 24 (c) The commissioner may adopt rules as necessary to 25 implement this section. (V.T.I.C. Art. 5.45.) 26 Source Law Art. 5.45. (a) An insurer, including a farm mutual insurance company, county mutual insurance $\frac{1}{2}$ 27 28 company, Lloyd's plan, or reciprocal or interinsurance 29 30 exchange, that renews a policy of homeowners 31 residential fire and allied lines insurance, insurance, farm and ranch owners insurance, or farm and ranch insurance must provide the policy holder with written notice of any difference in each form of 32 33 34 the policy offered to the policy holder on renewal and 35 36 form of the policy held immediately before the 37 renewal. 38 (b) A notice provided under this article must be 39 written in plain language. 40 (c) The commissioner may adopt rules as 41 necessary to implement this article. 42 CHAPTER 2003. PROCEDURES FOR EVALUATING FIRE LOSS RISK

Sec. 2003.001.

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SUBCHAPTER A. EVALUATING FIRE LOSS RISK

1	Sec. 2003.002. FIRE SUPPRESSION RATINGS FOR BORDER
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26	CHAPTER 2003. PROCEDURES FOR EVALUATING FIRE LOSS RISK
27	SUBCHAPTER A. EVALUATING FIRE LOSS RISK
28	Revised Law
29	Sec. 2003.001. FIRE LOSS INFORMATION. (a) The department
30	shall ascertain as soon as practicable the annual fire loss in this
31	state.
32	(b) The department shall, in a manner that will aid in
33	determining equitable insurance rates and methods to reduce annual
34	fire loss and insurance rates of this state or subdivisions of this
	80C30 KLA-D 958

- 1 state:
- 2 (1) obtain, make, and maintain records regarding the
- 3 annual fire loss in this state; and
- 4 (2) collect data concerning the annual fire loss as
- 5 necessary to enable the department to classify:
- 6 (A) fire losses in this state;
- 7 (B) the causes of those fire losses;
- 8 (C) the amount of the premiums collected for fire
- 9 loss for each class of risk; and
- 10 (D) the amount paid for the fire losses.
- 11 (c) The commissioner may designate one or more advisory
- 12 organizations or other agencies to gather, audit, and compile the
- 13 fire loss experience of insurers. The insurers shall bear the costs
- 14 incurred under this subsection.
- 15 (d) To implement this section, the department may:
- 16 (1) employ clerical personnel, inspectors, experts,
- 17 and other assistants; and
- 18 (2) incur other necessary expenses. (V.T.I.C.
- 19 Art. 5.25, Sec. (a) (part).)

20 <u>Source Law</u>

21 Art. 5.25. . 5.25. (a) [The State Board of Insurance Said Board shall have authority to employ 22 . .] 23 help, inspectors, clerical experts and 24 assistants, and to incur such other expenses as may be 25 necessary in carrying out the provisions of this law. 26 Said Board shall ascertain as soon as practicable the 27 obtain, annual fire loss in this State; maintain a record thereof and collect such data with 28 29 respect thereto as will enable said Board to classify 30 the fire losses of this State, the causes thereof, and the amount of premiums collected therefor for each class of risks and the amount paid thereon, in such manner as will aid in determining equitable insurance 31 32 33 34 rates, methods of reducing such fire losses of 35 reducing the insurance rates the State, 36 subdivisions of the State. The Board may designate one or more advisory organizations or other agencies to gather, audit, and compile such experience of 37 38 insurers, and the cost thereof shall be borne by such 39 40 insurers.

Revisor's Note

- 42 Section (a), V.T.I.C. Article 5.25, refers to the
- "State Board of Insurance." Chapter 685, Acts of the

73rd Legislature, Regular Session, 1993, abolished 1 2 that board and transferred its functions to the commissioner of insurance and the Texas Department of 3 Insurance. Throughout this chapter, references to the 4 5 State Board of Insurance have been changed 6 appropriately.

7 Revised Law

FIRE Sec. 2003.002. SUPPRESSION 8 RATINGS FOR BORDER 9 MUNICIPALITIES. In assigning or evaluating a fire suppression rating for a municipality at or near the border between this state 10 and another state or the United Mexican States, the commissioner 11 shall consider the existence and capabilities of a fire department 12 13 or volunteer fire department that:

- 14 (1) serves an adjoining or nearby municipality in the 15 other state or the United Mexican States; and
- 16 (2) by agreement or by long-standing practice provides 17 fire suppression services to the municipality in this state.

19 Source Law

(V.T.I.C. Art. 5.25-3 (part).)

Art. 5.25-3. The commissioner, . . . in assigning or evaluating a fire suppression rating for a municipality at or near the border between this state and another state or the United Mexican States, shall take into account the existence and capabilities of a fire department or volunteer fire department that serves an adjoining or nearby municipality in the other state or the United Mexican States and that by agreement or by long-standing practice provides fire suppression services to the Texas municipality.

30 Revised Law

- Sec. 2003.003. CREDIT FOR REDUCING FIRE HAZARD. The commissioner may give a locality, municipality, or other political subdivision credit for:
- 34 (1) each fire hazard that the locality, municipality, 35 or other political subdivision reduces or removes;
- 36 (2) additional fire-fighting equipment, increased 37 police protection, or any other equipment or improvement that tends 38 to reduce the fire hazard of the locality, municipality, or other

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- 1 political subdivision; and
- 2 (3) a good fire record made by the locality,
- 3 municipality, or other political subdivision. (V.T.I.C.
- 4 Art. 5.33, Sec. (a).)

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5 Source Law

Art. 5.33. (a) The commissioner may give each city, town, village, locality, or other political subdivision credit for each and every hazard they may reduce or entirely remove, and also for all added fire fighting equipment, increased police protection, or any other equipment or improvement that has a tendency to reduce the fire hazard of any such city, town, village, locality, or other political subdivision, and also to give credit for a good fire record made by any city, town, village, locality, or other political subdivision.

Revisor's Note

- (1) Section (a), V.T.I.C. Article 5.33, refers to a "city, town, [or] village." The revised law substitutes "municipality" for "city, town, [or] village" because that is the term used in the Local Government Code.
- (2) Section (a), V.T.I.C. Article 5.33, states that the commissioner of insurance may give credit for a fire hazard that a locality, municipality, or other political subdivision may "entirely remove." The revised law omits the term "entirely" because to "remove" something means to "entirely remove" it.

29 Revised Law

- Sec. 2003.004. POLICYHOLDER CREDIT FOR REDUCING
 HAZARD. (a) The commissioner may require an insurer to give
 credit to a policyholder for a hazard that the policyholder reduces
 or removes.
- 34 (b) For purposes of this section, the following actions 35 constitute a reduction in hazard by a policyholder:
- 36 (1) the installation of a new standard fire hydrant 37 approved by the department within the required distance of a risk, 38 as prescribed by the department; or
- 39 (2) the use of compressed air foam technology in 80C30 KLA-D 961

- 1 fire-fighting equipment.
- 2 (c) The insurer shall give credit in the proportion that the
- 3 hazard is reduced or removed and shall refund to the policyholder
- 4 the proportional part of the unearned premium charged for the
- 5 hazard that is reduced or removed. (V.T.I.C. Art. 5.33, Secs. (b),
- 6 (c), (d).)

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7 Source Law

- (b) The commissioner may also compel any company to give any or all policy holders credit for any and all hazards said policy holder or holders may reduce or remove.
- (c) For the purposes of this Article, the installation of a new standard fire hydrant approved by the department within the required distance of a risk, as prescribed by the department, or the use of compressed air foam technology in fire-fighting equipment shall constitute a reduction in hazard by the policy holder or holders.
- (d) Said credit shall be in proportion to such reduction or removal of such hazard and said company or companies shall return to such policy holder or holders such proportional part of the unearned premium charged for such hazard that may be reduced or removed.
- [Sections 2003.005-2003.050 reserved for expansion]
- 25 SUBCHAPTER B. MUNICIPAL FIRE LOSS LISTS

26 Revised Law

- Sec. 2003.051. ANNUAL LIST OF INSURED FIRE LOSSES BY
- 28 MUNICIPALITY. (a) The department shall compile for each
- 29 municipality in this state a list for distribution to the
- 30 municipality of the insured fire and lightning losses that:
- 31 (1) exceed \$100; and
- 32 (2) are paid in the municipality for the preceding
- 33 statistical year under policy forms:
- 34 (A) adopted or approved by the commissioner and
- authorized for use by Section 2301.052(b); or
- 36 (B) filed and in effect as provided by Section
- 37 2301.052(a).
- 38 (b) Each list must include:
- 39 (1) the name of each person recovering a loss under a
- 40 policy form described by Subsection (a);
- 41 (2) the address or location where the loss occurred;

1 and

- 2 (3) the amount paid by the insurer on the loss.
- 3 (c) The department shall develop each list from information 4 obtained from insurer reports of individual losses during the 5 statistical year. (V.T.I.C. Art. 5.25-2, Secs. 1, 2.)

6 Source Law

Art. 5.25-2

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- Sec. 1. In this article, "list" means the list of fire and lightning losses in excess of \$100 paid under policy forms adopted or approved by the commissioner under Article 5.35 of this code or filed and in effect as provided by Article 5.145 of this code in a particular city or town prepared by the department for distribution to the city or town.
- Sec. 2. (a) The department shall compile for each city or town in Texas a list of the insured fire losses paid under policy forms adopted or approved by the commissioner under Article 5.35 of this code or filed and in effect as provided by Article 5.145 of this code in that city or town for the preceding statistical year.
 - (b) The list shall include:
- (1) the names of persons recovering losses under policy forms adopted or approved by the commissioner under Article 5.35 of this code or filed and in effect as provided by Article 5.145 of this code;
- (2) the addresses or locations where the losses occurred; and
- (3) the amount paid by the insurance company on each loss.
- (c) The department shall obtain the information to make the lists from insurance company reports of individual losses during the statistical year.

Revisor's Note

(1)Sections 1 and 2, V.T.I.C. Article 5.25-2, refer to "policy forms adopted or approved by the commissioner under Article 5.35 of this code or filed and in effect as provided by Article 5.145 of this code." Under V.T.I.C. Article 5.35, policy forms for fire and allied lines insurance were adopted or approved by the commissioner of insurance. The 78th Legislature enacted Chapter 206, Acts of the 78th Legislature, Regular Session, 2003, which became effective June 11, 2003. Section 21.22 of that act amended Article 5.35 to provide that policy forms for residential property insurance, including fire and allied lines insurance, are now regulated under V.T.I.C. Article 5.13-2. However, under Section 2(b), V.T.I.C. Article 5.145, enacted by Section 2.01 of Chapter 206, an insurer may continue to use policy forms previously promulgated, approved, or adopted under Article 5.35. For clarity and to fully reflect the changes made by Chapter 206, the revised law substitutes "adopted or approved by the commissioner and authorized for use by Section 2301.052(b)," the revision of Section 2(b), V.T.I.C. Article 5.145, for "policy forms adopted or approved by the commissioner under Article 5.35 of this code."

(2) Section 1, V.T.I.C. Article 5.25-2, refers to a "city or town." Throughout this subchapter, the revised law substitutes "municipality" for "city or town" because "municipality" is the term used in the Local Government Code.

Revised Law

- Sec. 2003.052. MUNICIPALITY'S REQUEST FOR LIST; RETURN REPORT. (a) The department shall provide to a municipality a copy of the list compiled under Section 2003.051 for the municipality on the request of the municipality or the municipality's authorized agent or fire marshal.
- (b) Each municipality shall investigate the information contained in the list to determine the losses actually occurring within the limits of the municipality. The municipality shall report to the department:
- 28 (1) a list of the losses that actually occurred within 29 the limits of the municipality;
- 30 (2) a list of the losses that did not occur within the 31 limits of the municipality; and
- 32 (3) other evidence essential to establishing the losses occurring in the municipality. (V.T.I.C. Art. 5.25-2, Secs.
- 34 3, 4.)

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1	Source Law
2 3 4 5 6 7 8 9 10 11 12 13 14 15	Sec. 3. Upon the request of any city or town, or its duly authorized agent or fire marshall, the department shall provide that city and town with a copy of the list for its particular area. Sec. 4. Each city or town shall investigate its list to determine the losses actually occurring in its limits and shall make a report to the department, which report shall include: (1) a list of the losses that actually occurred in the limits of the city or town; (2) a list of any losses not occurring in the limits of the city or town; and (3) other evidence essential to establishing the losses in the city or town.
16	Revisor's Note
17	Section 3, V.T.I.C. Article 5.25-2, refers to a
18	request made by the "duly authorized agent or fire
19	marshall" of a municipality. The revised law omits
20	"duly" because the requirement that an agent be
21	authorized is sufficient to ensure that the agent has
22	proper authority to make the request.
23	Revised Law
24	Sec. 2003.053. LIST CORRECTIONS; USE. The department
25	shall:
26	(1) make changes that the department considers
27	appropriate to correct the list compiled under Section 2003.051 for
28	a municipality; and
29	(2) use the corrected list to determine the fire
30	record credit or debit for the municipality for the next year.
31	(V.T.I.C. Art. 5.25-2, Sec. 5.)
32	Source Law
33 34 35 36 37 38 39 40 41 42	Sec. 5. The department shall make such changes or corrections as to it shall seem appropriate in order to correct the list of insured fire and lightning losses paid under policy forms adopted or approved by the commissioner under Article 5.35 of this code or filed and in effect as provided by Article 5.145 of this code in a particular city or town and said list of losses, as changed or corrected, shall be used to determine the fire record credit or debit for each particular city or town for the next year.
43	Revised Law

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commissioner shall set and collect a charge for compiling and

Sec. 2003.054. CHARGE FOR LIST AND FIRE RECORD SYSTEM.

- 1 providing a list under this subchapter and as the commissioner
- 2 considers appropriate for administering the fire record system.
- 3 (V.T.I.C. Art. 5.25-2, Sec. 6.)

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4 Source Law

Sec. 6. The commissioner shall set and collect a charge for compiling and providing a list of fire and lightning losses paid under policy forms adopted or approved by the commissioner under Article 5.35 of this code or filed and in effect as provided by Article 5.145 of this code in a particular city or town and as the commissioner shall deem appropriate to administer the fire record system.

13 Revised Law

DEPARTMENT AUTHORITY TO REQUIRE PROVISION OF Sec. 2003.055. 14 15 FIRE LOSS INFORMATION. To accumulate statistical information for the control and prevention of fires, the department may require 16 each municipality in this state and each insurer engaged in 17 business in this state to provide to the department a complete and 18 accurate report that lists all fire and lightning losses occurring 19 20 in this state that are reflected in the municipality's or insurer's

21 records. (V.T.I.C. Art. 5.25-2, Sec. 7.)

22 Source Law

Sec. 7. The department is authorized to require each and every city or town in the State of Texas and each and every insurance company or carrier of every type and character whatsoever doing business in the State of Texas to furnish to it a complete and accurate list of all fire and lightning losses occurring within the State of Texas and reflected in their records for the purpose of accumulating statistical information for the control and prevention of fires.

32 Revised Law

33 Sec. 2003.056. DISCRETIONARY PROVISION OF LIST. The 34 department is not required to provide a list compiled under this 35 subchapter if the fire record system is not in effect. (V.T.I.C.

36 Art. 5.25-2, Sec. 8.)

37 <u>Source Law</u>

Sec. 8. The department may, at its discretion, furnish such list only during such time as the fire record system remains in force and effect.

41 <u>Revisor's Note</u>

42 Section 8, V.T.I.C. Article 5.25-2, states that

the Texas Department of Insurance has discretion to 1 2 provide a list while the fire record system remains "in force and effect." The revised law omits "force" from 3 the quoted language because "in force" is included in 4 5 the meaning of "in effect." [Sections 2003.057-2003.100 reserved for expansion] 6 SUBCHAPTER C. VOLUNTARY INSPECTION PROGRAM 7 8 Revised Law

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- Sec. 2003.101. DEFINITIONS. In this subchapter:
- 10 "Inspection" means a physical inspection 11 property for which residential property insurance is sought.
- "Inspection certificate" means a certificate 12 issued under this subchapter by an inspector indicating that the 13 14 condition of property meets or exceeds minimum standards.
- "Inspector" means a person authorized by the 15 16 commissioner to perform inspections under this subchapter.
- 17 (4)"Minimum standards" means the standards adopted by 18 the commissioner by rule regarding the insurability of property 19 under this subchapter.
- (5) "Residential property insurance" means insurance 20 21 against loss to real or tangible personal property at a fixed location that is provided though a homeowners insurance policy, a 22 residential fire and allied lines insurance policy, or a farm and 2.3 ranch owners insurance policy. (V.T.I.C. Art. 5.33B, Sec. 2.) 24

25 Source Law

- Sec. 2. In this article: (a) "Residential (a) "Residential property insurance" means insurance against loss to real or tangible personal property at a fixed location provided in a homeowners policy, residential fire and allied lines policy, or farm and ranch owners policy.
- "Inspection" (b) means physical inspection of the property for which residential property insurance is sought.
 (c) "Inspection
- certificate" means certificate issued by an inspector pursuant to this article indicating that the condition of the property meets or exceeds minimum standards.
- "Minimum (d) standards" are standards for property condition insurability under this article as the commissioner shall determine by rule.

"Inspector" means a person authorized 1 by the commissioner to perform inspections under this 2 3 article.

4 Revised Law

RIGHT TO VOLUNTARY INSPECTION OF PROPERTY 5 Sec. 2003.102.

6 CONDITION. A person with an insurable interest in real or tangible

personal property at a fixed location who desires to purchase

- 8 residential property insurance may obtain an independent
- 9 inspection of the condition of the property by an inspector
- authorized to perform inspections under this subchapter. (V.T.I.C. 10
- Art. 5.33B, Sec. 1.) 11

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12 Source Law

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Art. 5.33B Sec. 1. A Sec. 1. Any person having an insurable interest in real or tangible personal property at a fixed location who desires to purchase residential property insurance may procure an independent inspection of the condition of the property by an inspector authorized to perform inspections under this article of the property proposed to be insured.

21 Revised Law

- Sec. 2003.103. PLAN OF OPERATION. 22 (a) The commissioner
- 23 shall adopt a plan of operation for the voluntary inspection
- 24 program.
- 25 The plan of operation must include rules and standards
- for the voluntary inspection program, including: 26
- 27 (1) the manner and scope of the inspections to be
- performed; 28
- (2) the contents of the written evaluation report; 29
- 30 (3) the form of the inspection certificate to be
- 31 issued;
- 32 the term during which an inspection certificate is (4)
- valid; 33
- (5) rules for the certification or 34 licensing of
- persons authorized to perform inspections under the program; and 35
- 36 (6) the fee that may be charged a person requesting an
- 37 inspection under the program. (V.T.I.C. Art. 5.33B, Sec. 3(a)
- 38 (part).)

1 Source Law 2 Sec. 3. (a) The commissioner shall adopt 3 plan of operation for the Voluntary Inspection Program. The plan of operation shall include rules and 4 5 6 7 standards for the inspection program, including but not limited to the following: (1)the manner and scope of the 8 inspections to be performed; 9 (2) the contents of the written evaluation 10 report; 11 the form of the inspection certificate (3) 12 to be issued; 13 (4)the term during which an inspection 14 certificate shall remain valid; 15 (5) rules for the certification licensing of persons who are authorized to perform 16 inspections under this program, . . . and (6) the fee which may be charged to the 17 18

person requesting the inspection.

Revisor's Note

Section 3(a), V.T.I.C. Article 5.33B, refers to rules and standards for the voluntary inspection program "including but not limited to" specified items. Throughout this subchapter, the revised law omits "but not limited to" and similar phrases because Section 311.005(13), Government Code (Code Construction Act), applicable to the revised law, and Section 312.011(19), Government Code, provide that "includes" and "including" are terms of enlargement and not of limitation and do not create a presumption that components not expressed are excluded.

32 Revised Law

- 33 Sec. 2003.104. ELIGIBLE INSPECTORS. Persons who may be 34 certified or licensed to perform inspections under this subchapter 35 include:
- 36 (1) a person licensed to perform real property 37 inspections under Chapter 1102, Occupations Code; and
- 38 (2) a designated employee or agent of a county or 39 municipality that chooses to establish a voluntary inspection 40 program to inspect residential properties within the territorial 41 limits of the county or municipality. (V.T.I.C. Art. 5.33B, Sec.
- 42 3(a) (part).)

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1 Source Law . . . [The 234567 Sec. 3. (a) plan of operation shall include] [rules (5) for the certification licensing of persons who are authorized to perform inspections under this program,] which group shall include, but not be limited to: 8 (i) persons licensed to perform real property inspections under the Real Estate Licensing 9 10 designated employees or agents 11 (ii) of a county or municipality which elects to establish a 12 voluntary inspection program to inspect properties for residential properties within the territorial limits 13 14 15 of the county or municipality; . . 16 Revisor's Note Section 3(a)(5), V.T.I.C. Article 5.33B, refers 17 to persons licensed to perform inspections of real 18 property under the "Real Estate Licensing Act," 19 meaning Article 6573a, Vernon's Texas Civil Statutes. 20 21 The relevant part of that act was codified in 2001 as Chapter 1102, Occupations Code, which took effect in 22 23 For the convenience of the reader, the revised substitutes reference 24 law to Chapter 1102, а 25 Occupations Code. 26 Revised Law 27 Sec. 2003.105. PRESUMPTION OF INSURABILITY. (a) 28 existence of an inspection certificate issued under this subchapter 29 creates a presumption that the condition of the property inspected is adequate for the issuance of residential property insurance. 30 If an inspection certificate is used in whole or in part 31 32 to determine insurability, an insurer may require as a condition of issuing a residential property insurance policy that the applicant 33 34 for that insurance provide a written statement that there has not been a material or substantial change to the property condition 35 since the date of the inspection certificate. 36 37 An insurer who receives an inspection certificate may not use the condition of the property as grounds to refuse to issue 38 39 or renew residential property insurance unless the insurer:

reinspects the property; and

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specifies the areas of deficiency in the insurer's

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1	declination letter. (V.T.I.C. Art. 5.33B, Sec. 4.)
2	Source Law
3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	Sec. 4. (a) The existence of an inspection certificate issued under this article creates a presumption that the property condition is adequate for residential property insurance to be issued. (b) As a condition of issuing a policy if an inspection certificate is used in whole or in part to determine insurability, an insurer may require a written statement by the applicant for residential property insurance stating that there have been no material or substantial changes to the property condition since the date of the inspection certificate. (c) An insurer who receives an inspection certificate may not use property condition as grounds for refusing to issue or renew residential property insurance unless the insurer reinspects the property and specifies the areas of deficiency in its declination letter.
21	Revised Law
22	Sec. 2003.106. ENFORCEMENT. The commissioner by rule may
23	provide for the use of any disciplinary procedure authorized by
24	this code to:
25	(1) maintain the integrity of the voluntary inspection
26	program; or
27	(2) ensure compliance with this subchapter. (V.T.I.C.
28	Art. 5.33B, Sec. 5.)
29	Source Law
30 31 32 33	Sec. 5. The commissioner may by rule provide for the use of any of the disciplinary procedures authorized in this code to maintain the integrity of the program or ensure compliance with this article.
34	Revised Law
35	Sec. 2003.107. RULES. In addition to the plan of operation
36	adopted under Section 2003.103, the commissioner may adopt rules
37	that are appropriate to accomplish the purposes of this subchapter.
38	(V.T.I.C. Art. 5.33B, Sec. 6.)
39	Source Law
40 41 42 43	Sec. 6. The commissioner is authorized to adopt rules in addition to the plan of operation that are appropriate to accomplish the purposes of this article.
44 45	<u>Revisor's Note</u> (<u>End of Subchapter</u>)
46	Section 3(b), V.T.I.C. Article 5.33B, states that

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1	the commissioner of insurance by rule may encourage
2	the coordination of inspections under the article with
3	inspections under V.T.I.C. Article 5.33A. The revised
4	law omits this provision as impliedly repealed because
5	Article 5.33A was repealed by Section 21.48, Chapter
6	206, Acts of the 78th Legislature, Regular Session,
7	2003. The omitted law reads:
8 9 10 11	(b) The commissioner may adopt rules to encourage the coordination of inspections under this article with inspections performed under article 5.33A.
12	CHAPTER 2004. RESIDENTIAL PROPERTY INSURANCE IN UNDERSERVED AREAS
13	Sec. 2004.001. DEFINITION
14	Sec. 2004.002. DESIGNATION OF UNDERSERVED AREAS972
15	Sec. 2004.003. AUTHORIZATION FOR ISSUANCE OF INSURANCE 973
16	Sec. 2004.004. EXCLUSION OF CERTAIN COVERAGE
17	Sec. 2004.005. AVAILABILITY OF COVERAGE
18	Sec. 2004.006. POLICY FORMS
19	Sec. 2004.007. INAPPLICABILITY OF CERTAIN LAWS TO
20	PREMIUMS
21	Sec. 2004.008. RATES
22	CHAPTER 2004. RESIDENTIAL PROPERTY INSURANCE IN UNDERSERVED AREAS
23	Revised Law
24	Sec. 2004.001. DEFINITION. In this chapter, "residential
25	property insurance" means insurance against loss to real or
26	tangible personal property at a fixed location that is provided
27	through a homeowners insurance policy, residential fire and allied
28	lines insurance policy, or farm and ranch owners insurance policy.
29	(V.T.I.C. Art. 5.35-3, Sec. 1(a) (part).)
30	Source Law
31 32 33 34 35 36	(a) For purposes of this article, residential property insurance means insurance coverage against loss to real or tangible personal property at a fixed location provided in a homeowners policy, residential fire and allied lines policy, or farm and ranch owners policy.
37	Revised Law
38	Sec. 2004.002. DESIGNATION OF UNDERSERVED AREAS. (a) The

- commissioner by rule may designate an area as an underserved area 1
- 2 for residential property insurance.
- 3 In determining which areas to designate as underserved,
- the commissioner shall consider: 4
- 5 (1)whether residential property insurance is not
- 6 reasonably available to a substantial number of owners of insurable
- 7 property in the area; and
- any other relevant factor as determined by the 8 (2)
- 9 commissioner. (V.T.I.C. Art. 5.35-3, Sec. 1(a) (part).)

10 Source Law

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Art. 5.35-3 Sec. 1. (a Sec. 1. (a) By rule the commissioner may determine and designate areas as underserved areas for residential property insurance. In determining which designated as underserved, commissioner shall consider whether residential property insurance is not reasonably available to a substantial number of owners of insurable property in the underserved area and any other relevant factors as determined by the commissioner.

Revisor's Note

1(a), V.T.I.C. Section Article authorizes the commissioner of insurance to "determine and designate" underserved areas. The revised law omits the reference to "determine" because, context, "determine" is included in the meaning of "designate."

Revised Law

Sec. 2004.003. AUTHORIZATION FOR **ISSUANCE** 29 OF 30 INSURANCE. An insurer authorized to write property or casualty 31 insurance in this state, including a Lloyd's plan and a reciprocal or interinsurance exchange, that writes residential property 32 33 insurance in this state may write that insurance on forms adopted 34 under this chapter. (V.T.I.C. Art. 5.35-3, Sec. 2.)

Source Law

Allinsurers authorized to property or casualty insurance in this state and writing residential property insurance in this state, including those insurers licensed under Chapters 18 and 19 of this code, are authorized to write insurance on the forms adopted under this article.

Revisor's Note

Section 2, V.T.I.C. Article 5.35-3, refers to "insurers licensed under Chapters 18 and 19 of this code." Chapters 18 and 19 were codified in 2001 as Chapters 941 and 942 of this code, respectively. Chapters 941 and 942 provide for the authorization of Lloyd's plans and reciprocal and interinsurance exchanges to engage in business. For the convenience of the reader, the revised law substitutes a reference to those entities for the reference to Chapters 18 and 19.

Revised Law

Sec. 2004.004. EXCLUSION OF CERTAIN COVERAGE. Insurance provided under this chapter may not include windstorm and hail insurance coverage for a risk eligible for that coverage under Chapter 2210. (V.T.I.C. Art. 5.35-3, Sec. 1(b).)

Source Law

(b) The property protection program for underserved areas operated under this article may not include windstorm and hail insurance coverage for a risk eligible for that coverage under Article 21.49 of this code.

Revisor's Note

Section 1(b), V.T.I.C. Article 5.35-3, refers to the "property protection program for underserved areas operated under this article." The revised law substitutes a reference to "[i]nsurance provided under this chapter" because Article 5.35-3 does not contain any other reference to a "property protection program" and the substituted phrase is consistent with the terminology used in this chapter and in the law being revised.

Revised Law

Sec. 2004.005. AVAILABILITY OF COVERAGE. In a designated underserved area, each insurer described by Section 2004.003 shall provide to the insurer's agents, and the agents shall offer to all 80C30 KLA-D

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- 1 insureds, the full range of coverages prescribed under this chapter
- 2 subject to the insurer's applicable rates and underwriting
- 3 guidelines. (V.T.I.C. Art. 5.35-3, Sec. 5.)

4 Source Law

5 Sec. 5. In the designated underserved areas, all 6 insurers specified in Section 2 of this article shall 7 make available to their agents and all agents shall insureds the 8 full offer all range of coverages 9 promulgated under this article subject to the 10 applicable rates and underwriting guidelines of each 11 such insurer.

12 Revised Law

- Sec. 2004.006. POLICY FORMS. (a) The commissioner shall adopt policy forms for residential property insurance that are specifically for use in designated underserved areas. The policy forms must include a basic policy covering fire and allied lines perils with endorsements providing additional coverage at the
- 19 (b) An insurer writing insurance in an underserved area may
- 20 use the policy forms adopted under this chapter. (V.T.I.C.

22 Source Law

insured's option.

Art. 5.35-3, Sec. 3.)

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Sec. 3. The commissioner shall adopt policy forms for residential property insurance specifically for use in the designated underserved areas. The policy forms adopted pursuant to this article shall include a basic policy covering fire and allied lines perils with endorsements providing additional coverages at the option of the insured. The adopted policy forms may be used by all insurers writing insurance in underserved areas.

32 Revised Law

- 33 Sec. 2004.007. INAPPLICABILITY OF CERTAIN LAWS TO
- 34 PREMIUMS. The premium for an insurance policy written under this
- 35 chapter is not:
- 36 (1) subject to tax under Chapter 221; and
- 37 (2) considered net direct premiums under Section
- 38 2210.003(7). (V.T.I.C. Art. 5.35-3, Secs. 6, 7.)

39 Source Law

Sec. 6. The premium on all policies written pursuant to this article will not be subject to tax under Article 4.10 of this code.

1 2 3 4	Sec. 7. The premium on all policies written pursuant to this article will not be considered net direct premiums under the provisions of Section 3(g), Article 21.49, of this code.
5	Revised Law
6	Sec. 2004.008. RATES. Rates for coverage provided under
7	this chapter are determined according to the provisions of this
8	code applicable to the insurer providing the coverage. (V.T.I.C.
9	Art. 5.35-3, Sec. 4.)
10	Source Law
11 12 13 14	Sec. 4. The rates for residential property insurance subject to this article shall be determined in accordance with the provisions of this code applicable to each insurer.
15	CHAPTER 2005. HOME WARRANTY AND HOME
16	PROTECTION INSURANCE
17	Sec. 2005.001. DEFINITIONS
18	Sec. 2005.002. AUTHORIZATION TO WRITE CERTAIN
19	INSURANCE
20	Sec. 2005.003. MANNER OF REGULATION
21	Sec. 2005.004. LIMITS OF COVERAGE
22	CHAPTER 2005. HOME WARRANTY AND HOME
23	PROTECTION INSURANCE
24	Revised Law
25	Sec. 2005.001. DEFINITIONS. In this chapter:
26	(1) "Home protection insurance" means coverage
27	insuring a purchaser of a home protection service or product
28	against actual property loss.
29	(2) "Home protection service or product" means a
30	service or product used for the protection of residential property,
31	including a service or product provided by a person regulated under
32	Chapter 1702, Occupations Code.
33	(3) "Home warranty insurance" means coverage:
34	(A) insuring performance by a builder of
35	residential property of the builder's warranty obligations to a
36	purchaser of the residential property; or
37	(B) insuring against named defects arising from

failure of the builder to construct residential property in 1 accordance with specified construction standards. (V.T.I.C. Art. 2 3 5.53-A, Sec. 2.) 4 Source Law 5 Sec. 2. In this article: (1)"Home 6 warranty insurance" means 7 coverage insuring: (A) performance by builders of residential property of their warranty obligations to 8 9 10 purchasers of such property; or defects 11 (B) against named from failure of the builder to construct residential 12 13 property in accordance with specified construction 14 standards. "Home 15 (2) insurance" protection insuring purchasers of home protection 16 coverage 17 services or products against actual property loss. "Home protection service or product" 18 (3) means a service or product used for the protection of 19 residential property, including a service or product 20 provided by a person regulated under the Private Investigators and Private Security Agencies Act 21 2.2 and Private Security Agencies 23 (Article 4413(29bb), Vernon's Texas Civil Statutes). 24 Revisor's Note 25 Section 2(3), V.T.I.C. Article 5.53-A, refers to 26 the Private Investigators and Private Security 27 Agencies Act (Article 4413(29bb), Vernon's Texas Civil 28 Statutes). That statute was codified in 1999 as Chapter 1702, Occupations Code. The revised law is 29 drafted accordingly. 30 31 Revised Law Sec. 2005.002. AUTHORIZATION TO WRITE CERTAIN INSURANCE. 32 33 An insurer authorized to engage in the business of fire insurance 34 and allied lines or inland marine insurance may write home warranty 35 insurance or home protection insurance in this state. (V.T.I.C. 36 Art. 5.53-A, Sec. 1(a).) 37 Source Law 38 Art. 5.53-A Sec. 1. (a) 39 Any company licensed to engage in 40 the business of fire insurance and its allied lines, or inland marine insurance, or both, is authorized to 41 42 write home warranty insurance or home protection 43 insurance in this state. 44 Revisor's Note

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Section 1(a), V.T.I.C. Article 5.53-A, refers to

1	an insurer "licensed" to engage in the business of fire
2	insurance and allied lines or inland marine insurance.
3	The revised law substitutes "authorized" for
4	"licensed" because "certificate of authority" is the
5	term used throughout this code in relation to an
6	entity's authority to engage in business.
7	Revised Law
8	Sec. 2005.003. MANNER OF REGULATION. Home warranty
9	insurance or home protection insurance is not inland marine
10	insurance, but is governed in the same manner and to the same extent
11	as inland marine insurance. (V.T.I.C. Art. 5.53-A, Sec. 1(b).)
12	Source Law
13 14 15 16	(b) Insurance subject to this article is not inland marine insurance, but shall be governed in the same manner and to the same extent as inland marine insurance.
17	Revisor's Note
18	Section 1(b), V.T.I.C. Article 5.53-A, refers to
19	"[i]nsurance subject to this article." For clarity,
20	the revised law substitutes "[h]ome warranty insurance
21	or home protection insurance" for the quoted language
22	because those are the kinds of insurance subject to
23	Article 5.53-A, revised as this chapter.
24	Revised Law
25	Sec. 2005.004. LIMITS OF COVERAGE. The amount of coverage
26	under a home protection insurance policy may not exceed \$2,000 for
27	any single occurrence. (V.T.I.C. Art. 5.53-A, Sec. 1(c).)
28	Source Law
29 30 31	(c) The amount of coverage under a policy of home protection insurance may not exceed \$2,000 for any single occurrence.
32	CHAPTER 2006. PREMIUM RATE DISCOUNTS
33	SUBCHAPTER A. OPTIONAL PREMIUM DISCOUNT FOR USE OF INSULATING
34	CONCRETE FORM SYSTEM
35	Sec. 2006.001. DEFINITIONS
36	Sec. 2006.002. OPTIONAL PREMIUM DISCOUNT980

1	Sec. 2006.003. PROPERTY INSPECTION980
2	Sec. 2006.004. PREMIUM DISCOUNT; EXCEPTION
3	Sec. 2006.005. RULES
4	[Sections 2006.006-2006.050 reserved for expansion]
5	SUBCHAPTER B. OPTIONAL PREMIUM DISCOUNT FOR CERTAIN RESIDENTIAL
6	PROPERTY INSURANCE POLICIES
7	Sec. 2006.051. DEFINITIONS
8	Sec. 2006.052. OPTIONAL PREMIUM DISCOUNT982
9	Sec. 2006.053. APPROVAL OF ACTUARIALLY JUSTIFIED
10	PREMIUM DISCOUNT
11	Sec. 2006.054. LIMIT ON PREMIUM DISCOUNT
12	Sec. 2006.055. RULES AND GUIDELINES984
13	CHAPTER 2006. PREMIUM RATE DISCOUNTS
14	SUBCHAPTER A. OPTIONAL PREMIUM DISCOUNT FOR USE OF INSULATING
15	CONCRETE FORM SYSTEM
16	Revised Law
17	Sec. 2006.001. DEFINITIONS. In this subchapter:
18	(1) "Applicant" includes:
19	(A) an applicant for new insurance coverage; and
20	(B) a policyholder renewing insurance coverage.
21	(2) "Insulating concrete form system" means a building
22	construction system primarily used to frame exterior walls in which
23	polystyrene foam forms are placed in the walls of a structure under
24	construction and filled with concrete and steel reinforcing
25	material to become a permanent part of the structure.
26	(3) "Insurer" means an insurer authorized to write
27	property and casualty insurance in this state, including:
28	(A) a county mutual insurance company;
29	(B) a farm mutual insurance company;
30	(C) a Lloyd's plan; and
31	(D) a reciprocal or interinsurance exchange.
32	(V.T.I.C. Art. 5.33E, Sec. 1.)
33	Source Law
34	Art. 5.33E

2	Sec. 1. In this article: (1) "Applicant for insurance coverage"
3	(1) "Applicant for insurance coverage" includes an applicant for new coverage and a policyholder renewing coverage.
4 5 6 7	(2) "Insurer" means an insurer authorized to write property and casualty insurance in this state. The term includes:
8 9	(A) a county mutual insurance company;
LO	(B) a farm mutual insurance company; (C) a Lloyd's plan; and (D) a reciprocal or interinsurance
L1 L2 L3 L4 L5 L6 L7 L8	exchange. (3) "Insulating concrete form system" means a building construction system primarily used to frame exterior walls in which polystyrene foam forms are placed in walls of a structure under construction and filled with concrete and steel reinforcing material to become a permanent part of the structure.
20	Revised Law
21	Sec. 2006.002. OPTIONAL PREMIUM DISCOUNT. (a) In
22	accordance with the rules adopted by the commissioner under this
23	subchapter, an insurer may grant to an applicant a discount in the
24	applicant's homeowners insurance premiums for insured property on
25	receipt of written verification from the applicant that the
26	property was constructed with an insulating concrete form system.
27	(b) The commissioner by rule shall prescribe the
28	requirements for determining that a structure was constructed with
29	an insulating concrete form system.
30	(c) Verification under this section must comply with the
31	requirements prescribed by the commissioner. (V.T.I.C.
32	Art. 5.33E, Secs. 2, 3(a) (part).)
33	Source Law
34 35 36 37 38 39 10 11 12	Sec. 2. (a) On receipt of written verification from an applicant for insurance coverage, an insurer may grant a discount, in accordance with the rules adopted by the commissioner under this article, in the applicant's homeowners' insurance premiums for covered property that is constructed using an insulating concrete form system. (b) Verification under this section must comply with the requirements prescribed under Section 3 of this article.
14 15 16 17	Sec. 3. (a) The commissioner: (1) shall adopt rules that prescribe the requirements for determining that a structure has been built using an insulating concrete form system; and
19	Revised Law
50	Sec. 2006.003. PROPERTY INSPECTION. (a) If determined

necessary by the commissioner, the rules adopted under this 1 2 subchapter may require an inspection of the property to be insured. 3 The applicant shall pay the costs of a required inspection. (V.T.I.C. Art. 5.33E, Sec. 3(b).) 4 5 Source Law 6 (b) Ιf determined necessary bу the commissioner, the rules adopted under this section may 7 require an inspection of the property to be insured. The applicant for insurance coverage shall pay the 8 9 inspection 10 costs of required any under 11 subsection. 12 Revised Law Sec. 2006.004. PREMIUM DISCOUNT; EXCEPTION. (a) 13 The 14 commissioner by rule shall establish the premium discount under this subchapter based on sound actuarial principles. 15 The commissioner may approve a premium discount greater (b) 16 or less than the discount established by rule under Subsection (a) 17 18 if: 19 (1)the insurer files the proposed discount with the 20 department; and 21 the commissioner determines that the proposed (2) discount is actuarially justified. (V.T.I.C. Art. 5.33E, Sec. 4.) 22 23 Source Law 24 The commissioner shall establish Sec. 4. (a) by rule the amount of the premium discount applicable 25 article based 26 under this on sound actuarial 27 principles. 28 (b) The commissioner may approve a discount greater or less than the discount established under Subsection (a) of this section if: 29 30 31 (1)the insurer files the proposed 32 discount with the department; and the commissioner determines that the 33 (2) 34 proposed discount is actuarially justified. 35 Revised Law Sec. 2006.005. 36 RULES. The commissioner may adopt rules as 37 necessary to implement this subchapter in addition to other rules adopted under this subchapter. (V.T.I.C. Art. 5.33E, 38 Sec. 39 3(a)(part).)

Sec. 3. (a)

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Source Law

[The commissioner:]

1 2	(2) may adopt other rules as necessary to implement this article.
3	[Sections 2006.006-2006.050 reserved for expansion]
4	SUBCHAPTER B. OPTIONAL PREMIUM DISCOUNT FOR CERTAIN RESIDENTIAL
5	PROPERTY INSURANCE POLICIES
6	Revised Law
7	Sec. 2006.051. DEFINITIONS. In this subchapter:
8	(1) "Affiliate" means an entity classified as an
9	affiliate under Section 823.003.
10	(2) "Insurer" means an insurer authorized to write
11	residential property insurance, including:
12	(A) a county mutual insurance company;
13	(B) a farm mutual insurance company;
14	(C) a Lloyd's plan; and
15	(D) a reciprocal or interinsurance exchange.
16	(3) "Residential property insurance" means property
17	or property and casualty insurance covering a dwelling, including:
18	(A) homeowners insurance;
19	(B) residential fire and allied lines insurance;
20	(C) farm and ranch insurance; and
21	(D) farm and ranch owners insurance. (V.T.I.C.
22	Art. 5.43, Sec. (a).)
23	Source Law
24 25 26 27 28	Art. 5.43. (a) In this article:
29 30 31 32	to write residential property insurance, including a county mutual insurance company, farm mutual insurance company, Lloyd's plan, or reciprocal or interinsurance exchange.
33 34 35 36 37	(3) "Residential property insurance" means property or property and casualty insurance covering a dwelling, including homeowners insurance, residential fire and allied lines insurance, farm and ranch insurance, or farm and ranch owners insurance.
38	Revised Law
39	Sec. 2006.052. OPTIONAL PREMIUM DISCOUNT. (a) Except as
40	provided by Section 2006.053, an insurer that issues a residential

property insurance policy may:

1 (1)discount the premiums that would otherwise be 2 charged for the policy by not less than three percent if the 3 policyholder: has continuously been a residential property 4 (A) 5 insurance policyholder with the insurer or an affiliate of the 6 insurer; and 7 (B) not filed residential has а property 8 insurance claim during the three years before the effective date of 9 the policy; and increase the amount of the discount by one percent 10 (2) 11 for each subsequent year in which the policyholder: (A) has been a residential property insurance 12 13 policyholder with the insurer or an affiliate of the insurer; and 14 (B) has filed residential not а property insurance claim. 15 16 This section applies regardless of whether any of the policies that continuously covered the policyholder was a different 17 18 kind of residential property insurance policy from the policy

21 <u>Source Law</u>

(b) An insurer that issues a residential property insurance policy in this state may:

eligible for the premium discount. (V.T.I.C. Art. 5.43, Secs. (b),

- (1) provide a discount of not less than three percent in the premiums that would otherwise be charged for the policy if the policyholder has continuously been a residential property insurance policyholder with that insurer or an affiliate of that insurer but has not filed a residential property insurance claim during the three years before the effective date of the policy; and

 (2) increase the amount of the discount by
- (2) increase the amount of the discount by one percent for each subsequent year in which the policyholder has been a residential property insurance policyholder with that insurer or an affiliate of that insurer but has not filed a residential property insurance claim.
- (d) This article applies without regard to whether any of the policies that continuously covered the policyholder, as described by Subsections (b)(1) and (2) of this article, was a different type of residential property insurance policy from the policy eligible for the discount.

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(d).)

1	Revised Law
2	Sec. 2006.053. APPROVAL OF ACTUARIALLY JUSTIFIED PREMIUM
3	DISCOUNT. The commissioner may approve a premium discount filed
4	with the department that is greater or less than the discount
5	specified by this subchapter if the commissioner determines the
6	discount is actuarially justified. (V.T.I.C. Art. 5.43, Sec. (e)
7	(part).)
8	Source Law
9 10 11 12 13	(e) The commissioner may approve a discount filed with the department that is greater or less than the discount specified by this article if the commissioner determines the discount is actuarially justified.
14	Revised Law
15	Sec. 2006.054. LIMIT ON PREMIUM DISCOUNT. An insurer that
16	provides a premium discount under this subchapter is not required
17	to provide the discount in an amount that exceeds 10 percent of the
18	premiums that would otherwise be charged for the residential
19	<pre>property insurance policy. (V.T.I.C. Art. 5.43, Sec. (c).)</pre>
20	Source Law
21 22 23 24 25	(c) An insurer that provides a discount under this article is not required to provide a discount under this article that exceeds 10 percent of the premiums that would otherwise be charged for the residential property insurance policy.
26	Revised Law
27	Sec. 2006.055. RULES AND GUIDELINES. (a) The commissioner
28	shall adopt rules as necessary to implement this subchapter.
29	(b) The commissioner by rule shall establish guidelines
30	under which an insurer that provides a premium discount under this
31	subchapter shall determine the appropriate discount based on sound
32	actuarial principles. (V.T.I.C. Art. 5.43, Sec. (e) (part).)
33	Source Law

(e) The commissioner shall adopt rules as necessary to implement this article and shall establish by rule guidelines under which an insurer that provides a discount under this article shall determine the appropriate discount based on sound actuarial principles. . . .

1	CHAPTER 2007. ASSESSMENT FOR RURAL FIRE PROTECTION
2	Sec. 2007.001. APPLICABILITY OF CHAPTER
3	Sec. 2007.002. ASSESSMENT
4	Sec. 2007.003. DETERMINATION OF ASSESSMENT
5	Sec. 2007.004. DATES OF ASSESSMENT AND PAYMENT
6	Sec. 2007.005. RECOVERY OF ASSESSMENT
7	Sec. 2007.006. NOTICE TO POLICYHOLDERS987
8	Sec. 2007.007. VOLUNTEER FIRE DEPARTMENT ASSISTANCE
9	FUND
10	Sec. 2007.008. RULES; COOPERATION
11	Sec. 2007.009. EXPIRATION OF CHAPTER989
12	CHAPTER 2007. ASSESSMENT FOR RURAL FIRE PROTECTION
13	Revised Law
14	Sec. 2007.001. APPLICABILITY OF CHAPTER. This chapter
15	applies only to an insurer that:
16	(1) is authorized to engage in business in this state,
17	including a stock company, mutual insurance company, farm mutual
18	insurance company, county mutual insurance company, Lloyd's plan,
19	and reciprocal or interinsurance exchange; and
20	(2) writes a policy of:
21	(A) homeowners insurance;
22	(B) fire insurance;
23	(C) farm and ranch owners insurance;
24	(D) private passenger automobile physical damage
25	insurance;
26	(E) commercial automobile physical damage
27	insurance; or
28	(F) commercial multiple peril insurance.
29	(V.T.I.C. Art. 5.102, Secs. 1(1), (2) (part), 2.)
30	Source Law
31 32 33 34 35 36 37	Art. 5.102 Sec. 1. In this article: (1) "Insurer" means an insurer authorized to engage in business in this state, including a stock company, mutual, farm mutual, county mutual, Lloyd's plan, or reciprocal or interinsurance exchange. (2) ["Net direct premium" means the gross

1 2 3 4 5 6 7	direct premium written and reported by an insurer on annual financial statements on:] (A) policies of: (i) homeowner's insurance; (ii) fire insurance; (iii) farm and ranch owner's insurance;
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	physical damage insurance; and (B) a commercial multiple
L3	peril policy.
L1 L2 L3 L4 L5 L6	Sec. 2. This article applies only to an insurer that writes an insurance policy described by Section 1(2) of this article.
L7	Revised Law
L8	Sec. 2007.002. ASSESSMENT. The comptroller shall assess
L9	against all insurers to which this chapter applies a combined total
20	of \$15 million for each 12-month period. (V.T.I.C. Art. 5.102,
21	Sec. 3(a) (part).)
22	Source Law
23 24 25	Sec. 3. (a) The comptroller shall assess all insurers in an amount that totals \$15 million for each 12-month period
26	Revised Law
27	Sec. 2007.003. DETERMINATION OF ASSESSMENT. (a) In this
28	section, "net direct premium" means the gross direct premium
29	written and reported by an insurer on annual financial statements
30	on:
31	(1) an insurance policy described by Section
32	2007.001(2), other than a commercial multiple peril policy; and
33	(2) the nonliability portion of a commercial multiple
34	peril policy.
35	(b) Each insurer shall pay a portion of the assessment in
36	the proportion that the insurer's net direct premiums for the
37	period for which the assessment is made bear to the aggregate net
38	direct premiums written in this state by all insurers for that
39	period. (V.T.I.C. Art. 5.102, Secs. 1(2) (part), 3(a) (part).)
10	Source Law
11 12 13 14	<pre>[Sec. 1]</pre>

1 2 3 4 5 6 7 8 9	(i) homeowner's insurance; (ii) fire insurance; (iii) farm and ranch owner's insurance; (iv) private passenger automobile physical damage insurance; and (v) commercial automobile physical damage insurance; and] (B) the nonliability portion of a commercial multiple peril policy.
11 12 13 14 15	Sec. 3. (a) Each insurer shall pay a portion of the assessment in the proportion that the insurer's net direct premiums for the period for which the assessment is made bear to the aggregate net direct premiums written in this state for that period.
16	Revised Law
17	Sec. 2007.004. DATES OF ASSESSMENT AND PAYMENT. (a) The
18	comptroller shall assess insurers under this chapter on or before
19	September 1 of each year.
20	(b) An insurer shall pay the amount of the insurer's
21	assessment on or after the 60th day after the date the comptroller
22	assesses the insurer. (V.T.I.C. Art. 5.102, Secs. 3(b), (c).)
23	Source Law
24 25 26 27 28	 (b) The comptroller shall assess the insurers on or before September 1 of each year. (c) An insurer shall pay the amount assessed under this section on or after the 60th day after the date the comptroller assesses the insurer.
29	Revised Law
30	Sec. 2007.005. RECOVERY OF ASSESSMENT. An insurer may
31	recover an assessment under this chapter by:
32	(1) reflecting the assessment as an expense in a rate
33	filing required under this code; or
34	(2) charging the insurer's policyholders. (V.T.I.C.
35	Art. 5.102, Sec. 3(d).)
36	Source Law
37 38 39 40 41	 (d) An insurer may recover an assessment under this section by: (1) reflecting the assessment as an expense in a rate filing required under this code; or (2) charging the insurer's policyholders.
42	Revised Law
43	Sec. 2007.006. NOTICE TO POLICYHOLDERS. (a) An insurer
44	that recovers an assessment by charging the insurer's policyholders
45	under Section 2007.005 shall provide notice to each policyholder

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regarding the amount of the assessment being recovered. 1 2 (b) The notice may be included on: 3 (1)a declarations page; (2) a renewal certificate; or 4 5 (3) a billing statement. The commissioner by rule may adopt a form for providing 6 (c) 7 the notice. (V.T.I.C. Art. 5.102, Sec. 3(e).) 8 Source Law (e) An insurer that recovers an assessment under section from the insurer's policyholders shall 9 10 this provide a notice to each policyholder of the amount of 11 12 the assessment being recovered. The notice required 13 by this subsection may be included on a declarations page, renewal certificate, or billing statement. The commissioner by rule may adopt a form for providing 14 15 notice under this subsection. 16 17 Revised Law Sec. 2007.007. VOLUNTEER FIRE DEPARTMENT ASSISTANCE 18 19 The comptroller shall credit assessments collected under 20 this chapter to the volunteer fire department assistance fund created under Section 614.104, Government Code. 21 22 Art. 5.102, Sec. 3(f).) 23 Source Law 24 The comptroller shall credit assessments collected under this article to the volunteer fire department assistance fund created under Section 25 26 27 614.104, Government Code. 2.8 Revised Law Sec. 2007.008. RULES; COOPERATION. 29 (a) The comptroller 30 and the commissioner shall adopt rules as necessary to implement 31 this chapter. 32 The comptroller and the department shall cooperate as necessary to implement this chapter. (V.T.I.C. Art. 5.102, Sec. 33 4.) 34 35 Source Law

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cooperate as necessary to implement this article.

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1	Revised Law
2	Sec. 2007.009. EXPIRATION OF CHAPTER. This chapter
3	expires September 1, 2011. (V.T.I.C. Art. 5.102, Sec. 5.)
4	Source Law
5	Sec. 5. This article expires September 1, 2011.
6	[Chapters 2008-2050 reserved for expansion]
7	SUBTITLE E. WORKERS' COMPENSATION INSURANCE
8	CHAPTER 2051. GENERAL PROVISIONS: WORKERS' COMPENSATION INSURANCE
9	SUBCHAPTER A. APPLICABILITY AND CONSTRUCTION
10	Sec. 2051.001. DEFINITION
11	Sec. 2051.002. CONSTRUCTION OF CERTAIN LAWS 991
12	[Sections 2051.003-2051.050 reserved for expansion]
13	SUBCHAPTER B. COMPENSATION AND EXPENSES
14	Sec. 2051.051. LIMITATION ON COMPENSATION AND EXPENSES 992
15	[Sections 2051.052-2051.100 reserved for expansion]
16	SUBCHAPTER C. POLICYHOLDER DUTIES
17	Sec. 2051.101. DISCLOSURE BY POLICYHOLDER REQUIRED 993
18	[Sections 2051.102-2051.150 reserved for expansion]
19	SUBCHAPTER D. DUTIES AND PROHIBITED ACTS; ENFORCEMENT
20	Sec. 2051.151. NOTICE OF CLAIMS INFORMATION TO
21	POLICYHOLDER REQUIRED; ADMINISTRATIVE
22	PENALTY 994
23	Sec. 2051.152. PROHIBITED ACTS BY PERSON;
24	ADMINISTRATIVE PENALTY
25	Sec. 2051.153. LIABILITY OF POLICYHOLDER FOR
26	ADDITIONAL PREMIUM 997
27	Sec. 2051.154. PROHIBITED ACT BY INSURER;
28	ADMINISTRATIVE PENALTY
29	Sec. 2051.155. SANCTION OF AGENT REQUIRED
30	Sec. 2051.156. CANCELLATION OF CERTIFICATE OF
31	AUTHORITY REQUIRED
32	Sec. 2051.157. PENALTY FOR CERTAIN VIOLATIONS 999
33	[Sections 2051.158-2051.200 reserved for expansion]